

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90029 033 ***150.00

DOCUMENT # P36214

1. Entity Name

DYNO NOBEL FLORIDA, INC.

Principal Place of Business

11420 NW 134 ST
 MIAMI FL 33025

Mailing Address

11420 NW 134 ST
 MIAMI FL 33178-3113

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

87-0489665

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required.



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	HAWS, GEORGE A.	
STREET ADDRESS	8910 MIRAMAR PARKWAY, STE. 207	
CITY-ST-ZIP	MIRAMAR FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PINAULT, ROBERT	
STREET ADDRESS	11TH FLOOR CROSSROAD TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84144	
TITLE	D	<input type="checkbox"/> Delete
NAME	MITCHELL, TRANNY	
STREET ADDRESS	11TH FLOOR CROSSROADS TOWER	
CITY-ST-ZIP	SALT LAKE CITY FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	SIDMAN, KARL M.	
STREET ADDRESS	8910 MIRAMAR PARKWAY, SUITE 207	
CITY-ST-ZIP	MIRAMAR FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHEA, RICHARD	
STREET ADDRESS	11TH FLOOR CROSSROADS TOWER	
CITY-ST-ZIP	SALT LAKE CITY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	V P / D	<input type="checkbox"/> Change <input type="checkbox"/> Additio
NAME		
STREET ADDRESS	11420 NW 134 ST.	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Additio
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Additio
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TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Additio
NAME		
STREET ADDRESS	11420 NW 134 ST.	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Additio
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D, V P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Additio
NAME	Jeffrey G. Smith	
STREET ADDRESS	110 McHardy Road	
CITY-ST-ZIP	Whitesburg, GA 30185	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Karl M. Sidman **KARL M. SIDMAN**

1/21/00

305-823-6999

X 2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #