2002 UNIFORM BUSINESS REPORT (UBR)

May 24, 2002 8:00 am[§] Secretary of State P93000018784 DOCUMENT # 1. Entity Name 05-24-2002 91299 023 ***150.00 MARKET DYNAMICS GROUP, INC. Mailing Address Principal Place of Business 4729 N A1A 4729 N A1A STE 220 STE 220 VERO BEACH FL 32963 VERO BEACH FL 32963 2. Principal Place of Business 3. Mailing Address MARKET DYNAMES GROUP, INC MARKET DYNAMICS GROUP, INC Suite, Apt. #, etc. P48 171, S05 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. PMB 171, 505 BEACHLAND BLVD. STE. 1 BEACHLAND, BLUD. STE. I 4. FEI Number Applied For City & State City & State 59-3169732 VERD BEACH VERO BEACH Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32963-1798 U S A 32963 - 1798 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAMBRO, DAVID DAMBRO, DAVID Street Address (P.O. Box Number is Not Acceptable) SOS BEACHLAND BLVD PMBITI, STEI 4729 N A1A VERO BEACH FL 32963 City VERO BEACH 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be . 5 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) CR2E034 (9/01) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Delete TITLE ☐ Change TITLE DAMBRO, DAVID J NAME NAME PMB171, SOS BEACHLAND BLVD. STE. 1 4729 N A1A STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP 32963-1798 CITY-ST-ZIP VERD BEACH FL ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 all other like empowered.

DIRED DAMBRO, DAVID

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