

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jan 29 1996 8:00 am  
Secretary of State

DOCUMENT # P93000062410 (4)

1. Corporation Name

MANAGEMENT DYNAMICS, INC.

Principal Place of Business

15211 SW 150TH ST  
MIAMI FL 33196-2855  
US

Mailing Address

15211 SW 150TH ST  
MIAMI FL 33196-2855  
US



3. Date Incorporated or Qualified  
09/02/1993

3a. Date of Last Report  
02/27/1995

2. Principal Place of Business

2a. Mailing Address

21 12962 SW 133rd Court  
Suite, Apt. #, etc.

26 12962 SW 133rd Ct.  
Suite, Apt. #, etc.

22 Miami, Florida  
City & State

27  
City & State

23  
Zip Country

28 Miami, FL  
Zip Country

24 33186 Dade

29 33186 Dade

4. FEI Number

65-0441426

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MITHCELL, MICHELE S  
15211 SW 150TH STREET  
MIAMI FL 33196-2855

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

1/23/96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
SYNEGAL-MITCHELL, MICHELE  
STREET ADDRESS  
15211 SW 150 STREET  
CITY-ST-ZIP  
MIAMI FL

TITLE ☐ DELETE

NAME  
GRACE, MARJORIE  
STREET ADDRESS  
7700 EDGEWATER DR  
CITY-ST-ZIP  
OAKLAND CA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

Date

(305) 378-9280

Daytime Phone #

CR2E034 (12/95)