2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # **P94000076645** Mar 22, 2000 8:00 am Secretary of State 1. Entity Name DYNATEC TRADING CORP. 03-22-2000 90025 007 ***150.00 Mailing Address Principal Place of Business 2820 NW 72ND AVE 2820 NW 72ND AVE MIAMI FL 33122 MIAMI FL 33126-1105 628444 US 2. Principal Place of Business 3. Mailing Address 1617 NW 79TH AVE <u>1617 NW 79TH AVE</u> Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0527015 MIAMI FLIMAIM FLNot Applicable Country Zip Country \$8.75 Additional -Zip 5. Certificate of Status Desired Fee Required 33126-1105 USA 33126-1105 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HIRONO, IZUMI Street Address (P.O. Box Number is Not Acceptable) 1617 NW 79TH AVE 2820 NW 72ND AVE MIAMI FL 33122 Zip Code 33126-1105 City MIAMI FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition TITLE M Delete TITLE HIRONO. IZUMI NAME NAME HIRONO, IZUMI 2820 NW 72ND AVE STREET ADDRESS STREET ADDRESS 1617 NW 79TH AVE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33122** MIAMI FL 33126-1105 Delete ☐ Change ☐ Addition TITLE TIT) F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME 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 Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. Thereby certify that the information supplied with this filling 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 attachment with an address, with attachment.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OF PRINCED NAME OF SE

IZUMI HIRONO

03/16/2000

(305) 499-9600

Daytime