

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90095 045 ***150.00

DOCUMENT # P95000027935

1. Entity Name
DYNAMIC TAEKWON-DO, INC.

Principal Place of Business
3002 NORTH 35TH TERRACE
HOLLYWOOD FL 33021

Mailing Address
3002 NORTH 35TH TERRACE
HOLLYWOOD FL 33021

2. Principal Place of Business
5892 Stirling Road
 Suite, Apt. #, etc.
Suite 2

3. Mailing Address
5892 Stirling Road
 Suite, Apt. #, etc.
Suite 2

City & State
Hollywood, FL

City & State
Hollywood, FL

Zip
33021

Country
USA

Zip
33021

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0572833**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BILLERA, JOHN F
3002 NORTH 35TH TERRACE
HOLLYWOOD FL 33021

Name **Billera, John F.**

Street Address (P.O. Box Number is Not Acceptable)
5255 S.W. 38th Avenue

City **Fort Lauderdale** **FL** Zip Code **33312**

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 **(John F. Billera), President**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/23/01
 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, 2001 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 | P | <input type="checkbox"/> Delete |
| NAME | BILLERA, JOHN F | |
| STREET ADDRESS | 3002 NORTH 35TH TERRACE | |
| CITY-ST-ZIP | HOLLYWOOD FL 33021 | |
| TITLE | V | <input checked="" type="checkbox"/> Delete |
| NAME | BILLERA, ELIZABETH M | |
| STREET ADDRESS | 3002 NORTH 35TH TERRACE | |
| CITY-ST-ZIP | HOLLYWOOD FL 33021 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
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| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|----------------------------------|--|
| TITLE | President | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | John F. Billera | |
| STREET ADDRESS | 5255 S.W. 38th Ave. | |
| CITY-ST-ZIP | Fort Lauderdale, FL 33312 | |
| TITLE | Vice President | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ANNA WIDEKOV | |
| STREET ADDRESS | 5255 S.W. 38th Avenue | |
| CITY-ST-ZIP | Fort Lauderdale, FL 33312 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| 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.

SIGNATURE: **John F. Billera, President**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01 **305-406-5054**
 Date Daytime Phone #

CR2E034 (10/00)