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FILED
May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000047090 (2)**

1. Corporation Name

DYNASTY WORLDWIDE TRADING, INC.

Principal Place of Business

**1800 2ND STREET
SUITE 808-9
SARASOTA FL 34236**

Mailing Address

**1715 INDEPENDENCE BLVD
B-2
SARASOTA FL 34234-2141
US**

2. Principal Place of Business

21 **4475 Northgate Ct.**

Suite, Apt. #, etc.

22

City & State

23 **Sarasota FL.**

Zip

24 **34234**

Country

25

2a. Mailing Address

26 **4475 Northgate Ct.**

Suite, Apt. #, etc.

27

City & State

28 **Sarasota FL**

Zip

29 **34234**

Country

30

3. Date Incorporated or Qualified

06/16/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0585199

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

**LAROSSA, MICHAEL J
1715 INDEPENDENCE BLVD
B-2
SARASOTA FL 34234**

10. Name and Address of New Registered Agent

81 Name
LES GARDE CPA, PA
82 Street Address (P.O. Box Number is Not Acceptable)
7061 S. TAMiami TRAIL
83
SUITE 110
84 City
SARASOTA

FL

85 Zip Code
34231

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Debra Garde DEBRA GARDE

4-28-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE

NAME
MICHAEL J. LAROSSA
STREET ADDRESS
1715 INDEPENDENCE BLVD
CITY-ST-ZIP
SARASOTA FL

TITLE **President** ☐ DELETE

NAME
THOMAS COOK
STREET ADDRESS
1715 INDEPENDENCE BLVD
CITY-ST-ZIP
SARASOTA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do 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 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:

Thomas W. Cook
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-97 1941351 0709

Date

Daytime Phone #

CR2E034 (9/96)