FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

OCUMENT # P96000012938 (2)

BLACK DYNAMICS, INC.

FILED Apr 15 1998 8:00am Secretary of State

DENOIN	D ((AMARICO), IIAO,							
Principal Place	e of Business	Mailing Address				-{		EI IIII 1 5 61
5500 - 34TH ST. WEST		5500 - 34TH ST. WEST						
BRADENTON	BRADENTON FL 34210				DO NOT WRITE IN TH	IIS SPACE		
						3. Date Incorporated or Qualified		
						02/06/1996		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ar	plied For
21		26	26			65-0655369	No	t Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	– ,			5. Certificate of Status Desired	\$8.75 A	Additional equired
City & State		City & State				6. Election Campaign Financing	\$5.00	·
23		28	28			Trust Fund Contribution	Added	
Zip			Country			8. This corporation owes or has paid the	current year int	angible
24	25	29	30			Personal Property Tax due June 30.	Yes [No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Register	ed Agent	
DA\	MS, ROBERT C			81 Nai	me			+
550	0 - 34TH ST. WEST			82 Stre	et Addre	ess (P.O. Box Number is Not Acceptable)		-
BRA	ADENTON FL 34210					· · · · · · · · · · · · · · · · · · ·		
				83				
				84 City	/		85 Zip (Code
11. Pursuant I	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the ab	ove-nam	ned corpo	oration submits this statement for the purpos	e of changing it	s registered
office or re	e gistered age nt, or both, in the State on familia r with, and accept the obligation	of Florida. Such change was	authorized	l by the i	corporatio	on's board of directors. I hereby accept the	appointment as	registered
•	The man with and accept the obliga	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TOTIGE CIE.					i
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NC	TE: Registered	Agent sign	alure required	d when reinstating) DAT	E	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE	1.1 111	LE			☐ Change	Addition
NAME	ROBERT C. DAVIS		1.2 NA	1.2 NAME				
STREET ADDRESS			1.3 STREET ADDRESS		SS			
CITY-ST-ZIP	Dr. Pet		_	Y-ST-ZIP	_		116	n adata
TITLE	0	DELETE	2.1 717				☐ Change	Addition
NAME	ALBERT A. TUCKER			2.2 NAME				
STREET ADDRESS	8100 CLEARY BLVD., #1007			2.3 STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL DELETE			2. 4 CITY - ST - ZIP 3.1 TITLE		· ·	Change	Addition
TITLE	DC BATOKIA KOCED	ריו הנרנונ			į		CT CHAIR	L.J AGURION
NAME	PATRICIA KOGER 2331 N. CALVERT ST.		3.2 NA		ree l			
STREET ADDRESS	BALTIMORE MD			REET ADDRE	365			
CITY-ST-ZIP TITLE	DALTIMONE MU	☐ DELETE	3.4. UI 4.1 TiT	TY-ST-ZIP	-		Change	☐ Addition
NAME :		peccit	4.1 tri					
				REET ADDRE	ce			
STREET ADDRESS CITY-ST-ZIP				Y-ST-ZIP	.30			
TITLE		DELETE	5.1 TIT				Change	Addition
NAME		<u> </u>	5.2 NA		- 1		<u> </u>	
STREET ADDRESS			B.	REET ADDRE	ss			
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELETE	6.1 111				☐ Change	Addition
NAME			6.2 NA				-	
STREET ADDRESS				REET ADORE	ss			
CITY-ST-ZIP	•			Y-ST-ZIP				

14. 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 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 attraction ment with an address.

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4/6/98 (9A) 753-482