

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90158 030 ***150.00

DOCUMENT # P96000066539

1. Entity Name
PUBLISHING DYNAMICS, INC.



Principal Place of Business
9037 LONG LAKE PALM DRIVE
BOCA RATON FL 33496

Mailing Address
9037 LONG LAKE PALM DRIVE
BOCA RATON FL 33496

2. Principal Place of Business
9506 LANTERN Bay Circle

Suite, Apt. #, etc.
West Palm Beach FL

City & State

3. Mailing Address
9506 LANTERN Bay Circle

Suite, Apt. #, etc.
West Palm Beach, FL

City & State



☒ **CHECK HERE IF MAKING CHANGES**

4. FEI Number **13-2597095**

Applied For
Not Applicable

Zip **33411** **Country** **USA**

Zip **33411** **Country** **USA**

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

6. Name and Address of Current Registered Agent

HARRIS, ROBERT G
530 S FEDERAL HIGHWAY
DEERFIELD BCH FL 33441

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ **Delete**
NAME **JOHNSON, MARTIN**
STREET ADDRESS **9037 LONG LAKE PALM DRIVE**
CITY - ST - ZIP **BOCA RATON FL 33496**

TITLE **D** ☐ **Delete**
NAME **JOHNSON, DIANE**
STREET ADDRESS **9037 LONG LAKE PALM DRIVE**
CITY - ST - ZIP **BOCA RATON FL 33496**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
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NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ **Change** ☐ **Addition**
NAME **JOHNSON, MARTIN**
STREET ADDRESS **9506 LANTERN BAY CIRCLE**
CITY - ST - ZIP **WEST PALM BEACH, FL 33411**

TITLE **D** ☒ **Change** ☐ **Addition**
NAME **JOHNSON, DIANE**
STREET ADDRESS **9506 LANTERN BAY CIRCLE**
CITY - ST - ZIP **WEST PALM BEACH, FL 33411**

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY - ST - ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIANE JOHNSON

Date

Daytime Phone #

CR2E034 (10/02)