## 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

DOCUMENT # P9700009020 (3)

DYNAMIC REPRODUCTIONS, INC.

## FILED Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 639 CLEVELAND STREET. SUITE 310 639 CLEVELAND STREET. SUITE					( 188) 581 112 1211 12011 4011) Darit Saint
				)	
CLEARWATER FL 34815		CLEARWATER FL 34615	CLEARWATER FL 34615		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					01/24/1997
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4, FEI Number Applied For
21		26			59 343 0925 Not Applicable
Suite, Apt. #, etc.		<del></del> 1	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		City 9 Ctolo			Fee Required
	3	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
<b>Zip</b>	Country	<b>28</b>	Count	TV	This corporation owes or has paid the current year (ntangible)
24 33	755 25	— — — I	30	.,	Personal Property Tax due June 30. Yes No
	g, Name and Address of Curr				10. Name and Address of New Registered Agent
CA	SSANO, RAYMOND P		8	1 Name	
639 CLEVELAND STREET, SUITE 310				2 Street Ad	ddress (P.O. Box Number is Not Acceptable)
CLEARWATER FL 34615			DE Sireet Aut		inioso (i .v. dux mullibal as mul mocapidula)
			8	3	
			8	4 City	es 7:n Codo
- 1 T T T T T T T T T T T T T T T T T T	•		l°	City	FL 85 Zp Code 33755
agent. Lar SIGNATURE	m familiar with, and accept the obt	igations of, Section 607.0505, Flo	rida Statut	es.	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered i	<u> </u>		gent signature rec	quired when reinstating) DA1E
<b>12.</b> TITLE	D OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	CASSANO, RAYMOND P		1.2 NAM		Change (1) Addition
STREET ADDRESS	639 CLEVELAND STREET,	SHITE 310		ET ADORESS	
CITY-ST-ZIP	CLEARWATER FL 34615	JOHE OIL	1.4 C(1)		<b>プ</b> カッ た C
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	RIECHEL, RICHARD		2.2 NAM		33755  D X Change X Addition  Tin Kelen BERG, Richard  639 Clevel and ST. Suite 320  Clear MATER PC 33755
STREET ADDRESS	639 CLEVELAND STREET,	SUITE 310		ET ADDRESS	629 Cleveland ST. Slite 320
CITY-ST-ZIP	CLEARWATER FL 34615		2. 4 CITY	1	ChARLATER PC 33755
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAMI	·	-
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			3.4. CITY	- S1 - ZIP	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAM	Ε	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-SY-ZIP			4.4 CITY	ST-ZIP	
TITLE		DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY+ST-ZIP			5.4 CITY	ST-ZIP	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAM		,
STREET ADDRESS			6.3 STRE	et address	
CITY-ST-ZIP			6.4 CITY		
	ortify that the information supplied	with this filing does not avalify fo			in Section 119.07(3)(i). Florida Statutes, I further certify that the information

4. I hereby certify that the information supplied with this filing does not quality 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 by 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 truefce impowered 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 attactyment with an address.

MONATURE.

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