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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700054993

1. Corporation Name

DYNASTY INVESTMENT, INC.

## **FILED** Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90022 021 \*\*\*150.00



- Hillicipai Flace	of Dusiness	Maining / Maincoo			
5250 17TH ST		5250 17TH ST., STE, 6			
SARASOTA FL	34235	SARASOTA FL 34235		DO NOT WRITE IN THIS SE	PACE
				3. Date Incorporated or Qualifed	7.02
				06/23/1997	
2 Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	28 17m St	26 3428 17M.	St	65-0766122	Not Applicable
21 <b>34</b> Suite, Apt.		Suite, Apt. #, etc.	<del>- ,</del>		\$8.75 Additional
22	7,000	27		5. Certificate of Status Desired	Fee Required
City & State	a / -1	City & State		6, Election Campaign Financing	\$5.00 May Be
23 Sarasota +L 28 Janta, Fl			-L	Trust Fund Contribution	Added to Fees
Zip	Country		Country	B. This corporation owes the current year Intage	gible
24 34	235 1 1 1 A	29 34235 30	uso	Personal Property Tax.	Yes □No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Ag	ent
			81 Name		}
CHIU, DAWN			82 Street	Address ID O Pay Number is Not Acceptable)	
5250 17TH ST., STE. 6				Address (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34235			83	7 7 7 7 7	~
			J		
			84 City	Capota FI	85 Zip Code
44 Burguant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes th	ne above-named	corporation submits this statement for the purpose of ch	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D		1.1 TITLE	<u>Y</u>	Change
NAME	CLODE, ARTHUR	1	1.2 NAME	/	·   ;
STREET ADDRESS	5250 17TH ST., STE. 6		1.3 STREET ADDRESS	3428 17m St	6
CITY-ST-ZIP	SARASOTA FL 34235		1.4 CITY-ST-ZIP	346 17m St Scanota, FL 34235	
TITLE	D		2.1 TITLE		Change Addition
	CHIU, DAWN		2.2 NAME		
NAME STREET ADDRESS	5250 17TH ST., STE. 6		2.3 STREET ADORESS	3428 1700 St Samota, ZV 34235	
1	SARASOTA FL 34235		2. 4 CITY-ST-ZIP	GA-NU ZU 34235	•
CITY-ST-ZIP	SANASOTA FE 34233		2.4 CIT-51-2IP	Julie	Change Addition
TITLE				_	
NAME		i i	3,2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Change Addition
TITLE		_	4.1 TITLE		
NAME			4, 2 NAME		
STREET ADDRESS		14	4,3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		70
TITLE		_	5.1 TITLE	Ĺ	☐ Change ☐ Addition
NAME		B.	5.2 NAME		ŀ
STREET ADDRESS			5,3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	-	- Delete	6.1 TITLE	·	☐ Change ☐ Addition
NAME		6	6.2 NAME		
STREET ADDRESS	·	6	6.3 STREET ADDRESS		•
_			OF TO VIOL		

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 attachment with an address, with all other like empowered.