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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra 🔑, Mortham

Secretary of State DIVISION OF CORPORATIONS

.1998

DOCUMENT # P97000080372 (0)

DYNAMIC DIGITAL SOLUTIONS, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address												
88	99 NW 18	TERRACE		8899 NW 1	8899 NW 16 TERRACE							
MIAMI FL 33172				MIAMI FL	MIAMI FL 33172			DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified				
									09/15/1997			
	Principal P	lace of Busin	ness	2a. Mailing	2a. Mailing Address				4. FEI Number	··	M	Applied For
21				26							1	Not Applicable
٠, ١	Suite, Apt.	₩, etc.		}	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22	City & State			[27]	City & State						beriupeF	
23	Only & State			 1	28				6. Election Campaign Financing Trust Fund Contribution		4	May Be
	Zip		Country	Zip					8. This corporation owes or has paid the current year Intangible			
24			25	29		10			Personal Property Tax due Jun	_		□Ño
	9. Name and Address of Current Registered Agent								10. Name and Address of New R	egistered .	Agent	
		NGER, SEY				8	11 1	lam e				
l		SE 2 AVE				8	2 S	treet Addre	ss (P.O. Box Number is Not Accepta	ble)		
	MI	AMI FL 331	31									
						8	3					1
						8	4 C	Dity		FL	85 Zip	Code
11.	Pursuant t	to the provis	ions of Soctions 60	7.0502 and 607.1508.	Florida Statutes	the abo	ve-na	amed corpo	ration submits this statement for the		changing	its registered
11. Pursuant to the provisions of Soctions 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.												
	•		an and about the	obligations of, cooker.	00,,0000,1,000	ou olato.						
								ignature required	d when reinstating)	DATE		
12.		<u> </u>	OFFICER	S AND DIRECTORS	OUETE	13.			ADDITIONS/CHANGES TO OFFI	CERS AND		
TITLE	- 1	D	ע מרטסס	L	DELETÉ	1.1 TITLE		1			L Change	Addition
NAME	·		N, PEDRO W 18 TERRACE			1.2 NAM		20100				
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NAME	.					2.2 NAM	E				- •	
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CATY-	ST-ZIP					2. 4 CITY	'- ST - Z	TIP .	·			
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NAME						3.2 NAMI						1
	STREET ADDRESS					3.3 STREET ADDRESS						Ì
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	ET ADDRESS					4.3 STRE		DRESS				
	ST-ZIP					4.4 CITY						
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NAME	:					5.2 NAMI	E		•			
STREE	ET ADORESS		Ţ			5.3 STRE	ET ADO	RESS				
	ST-ZIP				Theres	5.4 CITY		P	· · · · · · · · · · · · · · · · · · ·		-	
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NAME)		6.2 NAMI						
	ET ADORESS		/	1		6.3 STRE						
	ST-ZIP Thereby c	ertify that th	e information supp	ed with this filing does	not qualify for	6.4 CITY- the exem			ection 119.07(3)(i), Florida Statutes.	further ce	rtify that th	e information

or nemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address.