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Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90148 050 ***150.00

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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000100761

1. Corporation Name

Dringing Diggs of Business

DYNAMIC SOLUTIONS ENGINEERING, INC.

Filincipai Flace	e of pusitiess	Mauling Address			
7704 PINE VISTA COURT ORLANDO FL 32819		7704 PINE VISTA COURT ORLANDO FL 32819			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					11/24/1997
					4. FEI Number Applied For
Principal Place of Business 2a. Mailing Address					
21 26					59-3479294 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desired
City & State City & State					C. Fleeting Compaign Singaping \$5.00 May De
					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23		28	Countr		
Zip -	Country <u>.</u>	Zip	_	у	8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax
24	25	29 30)		1 Glabilari Tepoti y Tax:
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
001	WAR HARRY I		81	Name	
SCHWAB, HARRY L			82	Street	Address (P.O. Box Number is Not Acceptable)
7704 PINE VISTA COURT					
ORLANDO FL 32819			83	3	
			84		FL 85 Zip Code
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					
0,0,0,0,0	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	<u> </u>	ent signature	required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		
NAME	SCHWAB, HARRY L		1.2 NAME		
STREET ADDRESS	7704 PINE VISTA COURT		1.3 STRE	ET ADDRESS	
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	
TITLE	ONE WEST LE SESTE	DELETE 2.111			☐ Change ☐ Addition
NAME	22.8		2.2 NAME		
				ET ADDRESS	
STREET ADDRESS	1 Application				
CITY-ST-ZIP_	1-21		2. 4 CITY-		Change Addition
TITLE	☐ DELETE 3.1 TF		3.1 TITLE		Cuarids Dyongon
NAME	AME 3.2 N		3.2 NAME		
STREET ADDRESS	REET ADDRESS 3.3 S		3.3 STREI	ET ADORESS	3
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		· • • • •	4. 2 NAME	:	***************************************
			_		I I

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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

☐ Change

Change

☐ Addition

Addition