

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90261 028 ***150.00

DOCUMENT # P98000058591

1. Entity Name

DYNASTY OF INDIAN RIVER, INC.



Principal Place of Business

**9400 SW 103 ST
MIAMI FL 33176**

Mailing Address

**9400 SW 103 ST
MIAMI FL 33176**

2. Principal Place of Business

485 18th Street
Suite, Apt. #, etc.

3. Mailing Address

Same
Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Same

Zip

32960

Country

FL

Zip

33176

Country

FL

4. FEI Number

65-0850455

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SOMAZA, JULIO
9400 SW 103 ST
MIAMI FL 33176**

7. Name and Address of New Registered Agent

Name

Myrna Somoza

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

9400 S.W. 103 Street

City

Miami

FL

Zip Code

33176

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

Myrna Somoza President

Myrna Somoza

4/21/03

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SOMOZA, JULIO**
STREET ADDRESS **9400 S.W. 103RD STREET**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **D** ☐ Delete
NAME **SOMOZA, MYRNA**
STREET ADDRESS **9400 S.W. 103RD STREET**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **3** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President, Secretary** ☒ Change ☐ Addition
NAME **Myrna Somoza**
STREET ADDRESS **9400 S.W. 103 Street**
CITY-ST-ZIP **Miami, FL 33176**

TITLE **Vice-President** ☒ Change ☐ Addition
NAME **Julio Somoza**
STREET ADDRESS **9400 S.W. 103 Street**
CITY-ST-ZIP **Miami, FL 33176**

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

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

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:

Myrna Somoza **Myrna Somoza**

4-21-03

(305) 598-0996

Date

Daytime Phone #

CR2E034 (10/02)