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 # P98000104649

DYNAMIC PETRO REALTY, INC.

Principal Place of Business	Mailing Address			
16565 N.E. 26TH. AVENUE _STE5F	16565_N.E. 26TH_AVENUE	STE_5F ೌಡಿಸಿನ್ನಟ	Gentlet the mental the mental the	
NORTH MIAMI BEACH FL 33160	NORTH MIAMI BEACH FL 33	3160	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualifed	
			12/17/1998	
2. Principal Place of Business	2a. Mailing Address		A CCI Number	For
21	26		4. FEI Number - 0892028 Applied I	icable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		S8.75 Additio	nal
22	27		5. Certificate of Status Desired Fee Required	i
City & State	City & State		6. Election Campaign Financing \$5.00 May E	3е
23	28		Trust Fund Contribution Added to Fee	<u>s</u>
Zip Country	Zip	Country	8. This corporation owes the current year Intangible	
24 25	29	30	Personal Property Tax.	1
9. Name and Address	s of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name		
KUSHNIR, SVETLANA		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
16565 N.E. 26TH AVENUE		0.0007.000		
North Miami Beach FL 3	3160	83		
		84 City	85 Zip Code	
			FL	
11. Pursuant to the provisions of Section	ns 607.0502 and 607.1508, Florida Statut	es, the above-named corp	oration submits this statement for the purpose of changing its regist	ered
office or registered agent, or both, if agent. I am familiar with, and accep	n the State of Florida. Such change was a of the obligations of, Section 607.0505, Flo	rida Statutes.	on's board of directors. I hereby accept the appointment as registered	,
SIGNATURE	-			
Signature, typed or printed name of		: Registered Agent signature required		1.40
	FICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ☐ Change ☐	Addition
TITLE D	☐ DELETÉ	1.1 TITLE	Criange	Augilion
NAME KUSHNIR, SVETLANA		1.2 NAME		
STREET ADDRESS 16565 N.E. 26TH AVE		1.3 STREET ADDRESS	,	-
CITY-ST-ZIP NORTH MIAMI BEACH		. 1.4 CITY-ST-ZIP		Addition
TITLE D	☐ DELETE	2.1 TITLE	Change	Addition
NAME KUSHNIR, ZORY		2.2 NAME		
STREET ADDRESS 16565 N.E. 26TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP NORTH MIAMI BEACH		2. 4 CITY-ST-ZIP		A -1.5°C
TITLE	☐ DELETE	3.1 TITLE	☐ Change	Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY ST 7ID		3.4. CITY-ST-ZIP		

CITY-ST-ZIP 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 suppliemental 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 C(TY-ST-Z)P

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

CITY-ST-ZIP

☐ DELETE

DELETE

DELETE

Change

☐ Change

☐ Change

Addition

Addition

☐ Addition

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90033 012 ***150.00