

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041082

1. Entity Name
DYNAMIC LIFE PRODUCTS, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90056 045 ***150.00

Principal Place of Business
6950 BRYAN DAIRY ROAD
LARGO FL 33777

Mailing Address
6950 BRYAN DAIRY ROAD
LARGO FL 33777



2. Principal Place of Business
6925 112th Circle North

3. Mailing Address
6925 112th Circle North

Suite, Apt. #, etc.
Suite 101

Suite, Apt. #, etc.
Suite 101

City & State
Largo, FL

City & State
Largo, FL

Zip
33773

Country
USA

Zip
33773

Country
USA

4. FEI Number 59-3577443

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TANEJA, JUGAL K
6950 BRYAN DAIRY ROAD
LARGO FL 33777

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
DS	TANEJA, JUGAL	6950 BRYAN DAIRY RD.	LARGO FL 33777	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	Taneja, Jugal	6950 Bryan Dairy Rd.	Largo, FL 33777	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	Shuman, Cani	6925 112th Circle North, Suite 101	Largo, FL 33773	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director

4/23/01

727/544-8866

Date

Daytime Phone #

CR2E034 (10/00)