

# 2001 UNIFORM BUSINESS REPORT (LPR)

1/13/01

**FILED**  
**Feb 09, 2001 8:00 am**  
**Secretary of State**

01-13-2001 90053 007 \*\*\*150.00

**DOCUMENT # P99000055491**

1. Entity Name  
**DYNAMIC PIVOT SCHOOL OF TRADING, INC.**

Principal Place of Business Mailing Address  
**4420 NORTH UNIVERSITY DRIVE PO BOX 30212**  
**LAUDERHILL FL 33351 FT LAUDERDALE FL 33303**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

**65-0960259**

4. FEI Number **APPLIED FOR**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEELE, EUGENE H**  
**4420 N UNIVERSITY DRIVE**  
**LAUDERHILL FL 33351**

Name

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

**1061 W OAKLAND PARK BLVD Suite 101**  
**Fort Lauderdale FL 33311**

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 **Eugene H Steele PRES.**

**01-03-01**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
**PSTD**  
**STEELE, EUGENE H**  
**PO BOX 30212**  
**FT LAUDERDALE FL 33303**

TITLE ☐ Change ☐ Addition  
**STEELE, EUGENE H**  
**PO BOX 30212**  
**FT LAUDERDALE FL 33303**

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**FT LAUDERDALE FL 33303**

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: **Eugene H Steele PRES.**

**1-08-01**

**954 746 7200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (10/00)