

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 5:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S66688** (0)
1. Corporation Name
DYNAMIC MEDIA, INC.

Principal Place of Business: **8225 THAMES BLVD SUITE B BOCA RATON FL 33433-8350 US**
Mailing Address: **8225 THAMES BLVD. SUITE B BOCA RATON FL 33433-8350 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/12/1991** 3a. Date of Last Report: **01/21/1994**
4. FEI Number: **65-0279578** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under § 199.002, Florida Statutes: Yes No

2. Principal Place of Business
21. **6501 VIA BENITA** 2a. Mailing Address: **6501 VIA BENITA**
22. **BOCA RATON, FL** 27. **BOCA RATON, FL**
23. **33433 USA** 28. **33433 USA**
24. Zip 25. Country 29. Zip 30. Country

9. Name and Address of Current Registered Agent
**HOLLAUS, MEREDITH
8225 THAMES BLVD., SUITE B
BOCA RATON FL 33433**

10. Name and Address of New Registered Agent
81. Name: **Meredith Hollaus Scott**
82. Street Address (P.O. Box Number is Not Acceptable): **6501 VIA BENITA**
83. **BOCA RATON**
84. City
85. Zip Code: **FL 33433**

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: *Meredith Hollaus Scott* **4/11/95**
(Signature of individual named in registered office and agent) (Date)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	HOLLAUS, MEREDITH
STREET ADDRESS	8225 THAMES BLVD., SUITE B
CITY ST ZIP	BOCA RATON FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	6501 VIA BENITA
1.4 CITY ST ZIP	BOCA RATON, FL 33433
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY ST ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on the 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, as changed, or on an attachment with an address.

SIGNATURE: *Meredith Hollaus Scott* **4/11/95** **407-993-2498**
(Signature and typed or printed name of signing officer or director) (Date) (Telephone Number)
Meredith Hollaus Scott