FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

}	JAL REPORT 1997	·) · j	Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
DOCUI	MENT # S6668	8 (0)			777111					
DYNAM	ic media, inc.									
Principal Place of Business Mailing Address							Han anni an	IN KIKIL KIKIL	HIII IIII	
6501 VIA BENI	TA	6501 VIA BENITA								
SUITE B BOCA RATON	\$! ??4? ?	BOCA RATON FL 33433-6413 US			·					
US	TE OPTOV	00				3. Date Incorporated or Qualified	3a. Date	of Last Re	eport	
			, , ,			07/12/1991	04/2	9/1996		
F	lace of Business	2a. Mailing Address				4. FEI Number		·	plied For	
Suite, Apt.	# etc	Suite, Apt #, etc.			65-0279578		\$8.75	t Applicable		
22	W. 500	27			5. Certificate of Status Desired		Fee Re			
City & State	0	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution		Added t	to Fees		
Zip	haran			itry		8. This corporation has liability for i		ax under s. No	. 19 9.032,	
24	24 25 29 30 30 30 9 Name and Address of Current Registered Agent					Florida Statutes L. 10. Name and Address of New Re				
					Name					
6501 VIA BENITA				B2	Street Addr	ess (P.O. Box Number is Not Acceptab	le)			
BOCA RATON FL 33433					Oli Oct / Idai	000 (1 /C/ 000 / 10 / 10 / 10 / 10 / 10 / 10				
			1	B3						
					City		<i>C</i> 1	85 Zip (Code	
44 Pursuant	to the rygueions of Sections 607 0	502 and 607 1508. Florida Statut	es the eh		named corn	poration submits this statement for the p	Uroose of c	hanging it	s registered	
office or n	egistered agent, or both, in the Sta	te of Florida. Such change was a	authorized	by i	the corporat	ion's board of directors. I hereby accep	it the appoi	ntment as	registered	
SIGNATURE	in tairing with, and accept the bon	igation of Socioli 607, Socioli 70	onda State	1145.						
SIGNATURE	Signature, typed or printed hand of registered a		E: Registered	Apen	iuper erutsogia ti	ed when reinstating)	DATÉ			
12.	OFFICERS A	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	IS IN 12	
TITLE NAME	LIGHT ALIA LIPAPANTI		•	1.1 TITLE 1.2 NAME			L	cuantha	L_ Mondon	
STREET ADDRESS	APAZ 144 BPUITA			1.2 NAME 1.3 STREET ADDRESS						
COV-ST ZIP	DOCA DATON FI			Y-\$T	l l					
TITLE	Vice-President DELETE 2			£	Vie	ce-President (V)		Change	Addition	
NAME	SerMOUR WILLIAM SCOTT 2			2.2 NAME		Lymour William SC 501 VIA Benita	011			
STREET ADDRESS	6501 Vinterit	4	2.3 STREET ADDRESS			501 VIA BenitA	- A. A.	. =		
CHY-ST-ZIP TILLE				2.4 CHY-ST-ZIP		OCA RATON, FI	5 <i>343</i>	Change	Addition	
NAME		vicere	3.2 NAME		ľ		_			
STREET ADDRESS					ADDRESS				į	
CITY-S1-ZIP			3 4. CiT							
TITLE		DELETE	ETE 41 TITU					Change	Addition	
NAME			4, 2 NAM							
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP	·····	DELETE	4.4 City- 5.1 Title		- ZIP			Change	Addition	
TITLE NAME		D procie	5.1 TIILE 5.2 NAME				٠ ـ ـ	- Creaning		
STREET ADDRESS					ADDRESS					
CHY-ST-ZII			5.4 CIT		l					
TITLE		DELETE	6.1 TITE					Change	Addition	
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 STR	EET A	ADDRESS .		•			

14. I do 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 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 if changed, or on an attachment with an address.

SIGNATURE:

FILED

Apr 18 1997 8:00am