DOCUMENT # V53366

1. Entity Name

DYNAMIC ENTERPRISES OF BREVARD, INC.

FILED Mar 09, 2001 8:00 am Secretary of State 03-09-2001 90503 041 ***150.00

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| SIGNATURE 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 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria or back) 11. OFFICERS AND DIRECTORS TITLE MAKE GANOE, RAYMOND GITS-1-ZP COCOA FL 32922 TITLE VD GANOE, NOREEN S SIREET ADDRESS CITY-ST-ZP COCOA FL 32922 TITLE GANOE, NOREEN S SIREET ADDRESS CITY-ST-ZP COCOA FL 32922 TITLE GANOE SIREET ADDRESS CITY-ST-ZP COCOA FL 32922 TITLE GORGESS CITY-ST-ZP COCOA FL 32922 TITLE GORGESS CITY-ST-ZP COCOA FL 32922 TITLE GORGESS CITY-ST-ZP COCOA FL 32922 CITY | | | | | . | Name | | | | |
| B. 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 trie if applicable. (NOTE, Registered Agent signature required when reinstaking) DATE | | P.O. Box Number is Not Acceptable) | | | | Street A | | 1157 INDIAN RIVER DR. | | |
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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 attactment with an address, with an other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #