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

PROFIT CORPORATION ANNUAL REPORT

1998

POMPANO BEACH FL 33062-4913

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Ζip

700 NE 28TH AVE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

25

LAVISTA, ANTHONY

(2)

POMPANO BEACH FL 33062-4913

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

29

g. Name and Address of Current Registered Agent

700 NE 28TH AVE.

DYNAMIC DUO COMMUNICATIONS, INC.

FILED Jan 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes Yes

954 786 9888

Not Applicable

3. Date Incorporated or Qualified 07/27/1992

65-0320106

5. Certificate of Status Desired

Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

4. FEI Number

| 700 NE 28TH AVE POMPANO BCH, FL 33062 | | | Street Address (P.O. Box Number is Not Acceptable) | | |
|--|------------------------|---------------|--|--|--|
| PUMPANU BUR. FL 33002 | | 83 | | | |
| | | | | | |
| | | | City FL 85 Zip Code | | |
| 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | |
| 12. OFFICERS AND DIRECTORS 13. | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PD DELETE | 1.1 TITLE | | Change Addition | |
| NAME | LAVISTA, ANTHONY | 1.2 NAME | | | |
| STREET ADDRESS | 700 NE 28 AVE | 1.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | POMPANO BEACH FL 33062 | 1.4 CITY-S | | | |
| TITLE | ☐ DELETE | 2.1 TITLE | | Change Addition | |
| NAME | | 2.2 NAME | | | |
| STREET ADDRESS | | 2.3 STREET | ADDRESS | | |
| ÇITY-ST-ZIP | | 2. 4 ÇITY - S | T-ZIP | | |
| TITLE | ☐ DELETE | 3.1 TITLE | | Change Addition | |
| NAME | | 3.2 NAME | | | |
| STREET ADDRESS | | 3.3 STREET | ADDRESS | | |
| CITY - ST - ZIP | | 3.4. CITY - S | T-ZIP | | |
| TITLE | DELETE . | 4,1 TITLE | _ | Change | |
| NAME | | 4. 2 NAME | | | |
| STREET ADDRESS | | 4.3 STREET | ADDRESS | | |
| CITY - ST - ZIP | | 4.4 CITY-S | i~ ZIP | | |
| TITLE | DELETE | 5.1 TITLE | | Change Addition | |
| NAME | | 5.2 NAME | | | |
| STREET ADDRESS | | 5.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | | 5.4 CITY - S | - ZIP | | |
| TITLE | DELETE | 6.1 TITLE | | Change Addition | |
| NAME | | 6.2 NAME | | | |
| STREET ADDRESS | | 6.3 STREET | address | | |
| CITY-ST-ZIP | AL | 6.4 CITY-S | | O the 440 07/04's Flaids Channel I to the contife to the second of | |
| 14. 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 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. | | | | | |

Country

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