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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 264764

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90003 015 ***150.00

1. Corporation Name												
FINANCIAL SYNERGETIX CORPORATION												
			,,,,	-) 100/04 1982 3888 3838 1888 3	in aldi aldi l di	() () ()		N) 1909)
Principal Place	e of Business		М	lailing Address) (BIL BIB(1 6 1	P IL D I B () V I	T14 1881
77 NW 166TH STREET 77 NW 166TH STREET												
MIAMI FL 33169 MIAMI FL 33169							DO NOT WRITE IN THIS SPACE					
US							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
								05/28/1970				- }
a Principal P	lace of Business		25	. Mailing Address				4. FEI Number Applied Fo				For
$\overline{}$	lace of Busiless		26	. Mailing Addicas				59-1447665		Not Applicable		
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75 Additional			onal
22	27							5. Certifcate of Status Desired		Fee	Require	d
City & State City & State					-			6. Election Campaign Financing \$5.00 May Be				Be
23			28					Trust F Contribution	_ 		d to Fee	s
Zip	Country Zip				Cou	ntry		8. This corporation owes the current year Intangible				
24	25 29 30							Personal Property Tax. Yes No				
.,,	9. Name and	Address of Curre	nt Regi	stered Agent		04	Name	10. Name and Address of New I	registered /	gent		
CILIF	: IOEI T				ļ	81	Name					
	ë, joel t NW 166TH Stri	ET			Ì	82	Street Addre	ess (P.O. Box Number is Not Accepta	able)			
	MI FL 33169	LI				83					_	
IVI(A)	m 1 L 33 103				1	03						
						84	City		FL	85 Z	ip Code	_
11 Pursuant	to the provisions	of Sections 607.050	02 and 6	607,1508, Florida Statu	tes, the al	bove	-named corpo	oration submits this statement for the	numose of	hanging	its regis	tered
office or r	enistered agent o	or both in the State	of Flori	ida. Such change was a f, Section 607.0505, Flo	authonzed	i bv :	the corporatio	n's board of directors. I hereby acce	ot the appoin	tment as	register	ed
SIGNATURE	·										_	{
	Signature, typed or prin	nted name of registered age				Agen	t signature required	d when reinstating) ADDITIONS/CHANGES TO OF	DATE	D DIDEC	TODE	1 12
12.	00	OFFICERS A	אט טואו	DELETE	13.	ne		ADDITIONS/CHANGES TO OF	FICERS AIN	Chan		Addition
TITLE	PD			DOLLETE	1.1 III						, <u> </u>	
NAME	FINE, JOEL T						ADDRESS					ļ
STREET ADORESS	77 NW 166TH	101					ADURESS					
CITY-ST-ZIP	MIAMI FL						77ID (}
ì	1			☐ DELETE	1.4 C/I	TY-ST	r-ZIP			☐ Chan	ge	Addition
				☐ DELETE	1.4 C/I 2.1 T/I	TY-ST	r- ZIP			☐ Chan	ge 🗆	Addition
NAME				☐ DELETE	1.4 C/I 2.1 T/I 2.2 NA	TY-ST TLE VME				☐ Chan	ge 🗆	Addition
STREET ADDRESS				☐ DELETE	2.1 TII 2.2 NA 2.3 ST	TY-ST TLE VME TREET	ADDRESS			☐ Chan	ge 🗆	Addition
STREET ADORESS CITY-ST-ZIP			e	☐ DELETE	1.4 C/I 2.1 T/I 2.2 NA	TY-ST TLE WME TREET	ADDRESS T-ZIP	3				Addition
STREET ADDRESS CITY-ST-ZIP			s		2.1 TII 2.2 NA 2.3 ST 2.4 CI	TY-ST TLE WIE TREET TTY-S	ADDRESS T-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE " NAME			e		1.4 C/I 2.1 T/I 2.2 NA 2.3 ST 2.4 C/I 3.1 T/I 3.2 NA	TY-ST TLE WIE TREET TTY-S TLE	ADDRESS T-ZIP	3	- / - / North To /			
STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			<i></i>		1.4 C/I 2.1 T/I 2.2 NA 2.3 ST 2.4 C/I 3.1 T/I 3.2 NA	TY-ST TLE WME TREET TTY-S TLE WME	ADDRESS T-ZIP ADDRESS	s	- / - · · · · · · · · · · · · · · · · ·		ge √C	Addition
STREET ADDRESS CITY-ST-ZIP TITLE " NAME					1.4 C/I 2.1 T/I 2.2 NA 2.3 ST 2.4 C/I 3.1 T/I 3.2 NA 3.3 ST	TY-ST TLE WME TREET TTY-S TLE WME TREET	ADDRESS T-ZIP ADDRESS	3			ge √C	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			*	☐ DELETE	1.4 C/I 2.1 T/I 2.2 NA 2.3 ST 2.4 C/I 3.1 T/I 3.2 NA 3.3 ST 3.4. C/I	TY-ST TLE TREET TIY-S TLE TREET TREET TY-S TLE	ADDRESS T-ZIP ADDRESS	3	- / - x	∝	ge √C	Addition
STREET ADDRESS CITY-ST-ZIP TITLE " NAME STREET ADDRESS CITY-ST-ZIP TITLE			£	☐ DELETE	2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N	TY-ST TLE AME REET TTY-S TLE REET TTY-S TLE	ADDRESS T-ZIP ADDRESS	3		∝	ge √C	Addition
STREET ADDRESS CITY-ST-ZIP TITLE " NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				☐ DELETE	2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N	TY-ST TLE AME TREET TIV-S TLE TLE TLE TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			Chan	gge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			÷	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT	TY-ST TLE AME TREET TILE AME TREET TY-ST TLE AME TREET TY-ST	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			∝	gge _	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			<i>÷</i>	☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA	TY-ST TLE TREET TTY-S TLE TREET TY-S TLE TTY-ST TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	,		Chan	gge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE				☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST	TY-ST TLE AME REET TTY-S TLE AME TREET TY-ST TLE AME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			Chan	gge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		-	-	DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI	TY-ST TLE AME TREET TY-S TLE AME TREET TY-SI TLE AME TY-SI TLE TY-SI TLE TY-SI TLE TY-SI TY-SI TY-SI TY-SI TY-SI	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			☐ Chan	ge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS				☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4 CI 4.1 TIT 4.2 NA 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.	TY-ST TLE AME TREET TY-S TLE AME TREET TY-S TLE AME TREET TY-S TLE TREET TY-S TLE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			Chan	ge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP				DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2. 4 CI 3.1 TIT 3.2 NA 3.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.2 NA	TY-ST TLE AME TREET TY-S TLE AME TY-ST TLE TY-ST TLE TY-ST TLE AME TY-ST TLE AME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	5		☐ Chan	ge _	Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE TITLE 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 TITLE				DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2. 4 CI 3.1 TIT 3.2 NA 3.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.2 NA	TY-ST TLE AME TREET TITY-S TILE AME TREET TY-ST TILE AME TREET TY-ST TILE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	3		☐ Chan	ge _	Addition Addition

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 of 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 air attachment with an address, with all other like empowered.

SIGNATURE: