## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000004870

FILED Apr 26, 2005 Secretary of State

Entity Name: SYNERGY INFORMATION TECHNOLOGY, INCORPORATED

Current P	rincipal Place	e of Business:	New Principal Place	e of Business:
	PARKWAY, SU ILLS, NJ 0707			
Current N	lailing Addres	ss:	New Mailing Addres	ss:
	PARKWAY, SU ILLS, NJ 0707			
El Number	: 22-3484974	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
lame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	JACOB TH STREET NO ATER, FL 337			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
the Stat	e of Florida. RE:	submits this statement for the		ed office or registered agent, or both,  Date
the Stat	e of Florida. RE: Electror			
n the Stat	e of Florida. RE: Electror	nic Signature of Registered Ag g Trust Fund Contribution ().	ent	
n the Stat  GIGNATU  Jection Ca  DFFICER  itle: ame: ddress:	e of Florida.  RE: Electror  mpaign Financin  S AND DIREC	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: ) Delete RAND M	ent	Date
n the Stat	e of Florida.  RE: Electror  mpaign Financin  S AND DIREC  DP ( DIWAN, MAKAI 49 FOREST DE SPRINGFIELD	nic Signature of Registered Ag g Trust Fund Contribution ( ). TORS: ) Delete RAND M RIVE , NJ 07081 ) Delete RAN M RIVE	ent  ADDITIONS/CHANG  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAKARAND M DIWAN PRES 04/26/2005