

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 21, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # F04000004431  
 1. Entity Name  
 KA TET SYNERGIES INC.



Principal Place of Business      Mailing Address  
 77 PROSPECT STREET      77 PROSPECT STREET  
 RIDGEFIELD, CT 06877      RIDGEFIELD, CT 06877



01312008      No Chg-P      CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 06-1498337      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BRENNAN, MARTIN  
 3055 GENOA LANE  
 JUPITER, FL 33477

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BRENNAN, MARTIN 77 PROSPECT STREET RIDGEFIELD, CT 06877
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BIANCULLI, FRANK 17 CONKLIN ST., STE 3 FARMINGDALE, NY 11735
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/28/08-80055-005 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martin W Brennan      MARTIN W BRENNAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #