SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300001285 (6)

SYNTEK ASSET MANAGEMENT, INC.

Principal	Place	of	Business
-----------	-------	----	----------

Mailing Address

FILED Sep 12 1997 8:00am Secretary of State



10870 NORTH CENTRAL EXPRESSWAY, SUITE 600 DALLAS TX 75231		10670 NORTH CENTRAL EXPRESSWAY. SUITE 600 DALLAS TX 75231		DO NOT WRITE IN THIS SPACE			
	•				 Date Incorporated or Qualified 03/05/1993 	3a. Date of Last Report 04/15/1996	
——— ₁	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			75-2300452	Not Applicat	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	30 Count	y	 This corporation owes or has pa Personal Property Tax due June 	30. 🗶 Yes 🗌 No	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Re	gistered Agent	
	CORPORATION SYSTEM		8	Name			
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			8:		ddress (P.O. Box Number is Not Acceptable)		
			8				
			8	City		FL 85 Zip Code	
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State or im familiar with, and accept the obligation Signature, typed or printed name of registered agent				corporation submits this statement for the poration's board of directors. I hereby acception of the properties of the pr	urpose of changing its registered the appointment as registered	
12.	OFFICERS AND		13.	jent signature n	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1 TITLE		ADDITIONO/OF IA/VACE TO OF THE	Change Additi	
NAME	PAULSON, RANDALL M	- · · · ·	1.2 NAME	1			
STREET ADORESS	10670 N CENTRAL PKWY STE	600	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	DALLAS TX		1.4 CITY-	ST-ZIP			
TITLE	٧	☐ DELETE	2.1 TITLE			Change Acdili	
NAME	HOLLAND, THOMAS A		2.2 NAME				
STREET ADDRESS	10670 N CENTRAL EXPRWY ST	E 600	2.3 STREE	T ADDRESS	,		
CITY-ST-ZIP	DALLAS TX		2. 4 CITY	- ST - ZIP			
TITLE	VS	☐ DELETE	3.1 TITLE			Change Additi	
NAME	Waldman, Robert A		3.2 NAME				
STREET ADDRESS	10670 N. CENTRAL EXPWY., SU	JITE 600	3.3 STREE	T ADDRESS			
CITY-ST-ZIP	DALLAS TX 75231	DELETÉ	3.4. CITY	- ST - ZIP			
TITLE	AL DOGH D	☐ DETEIE	4.1 TeTLE			Change Additi	
NAME	Potera, drew d 10670 N. Central Expwy., Si	HTT OAA	4. 2 NAM				
STREET ADDRESS	DALLAS TX 75231	JIE 600		TADDRESS			
CITY-ST-ZIP	CD	DELETE	4.4 CITY- 5.1 TITLE			Change Additi	
NAME	PHILLIPS, GENE E	And second	5.2 NAME	!		— v.orgo — radio	
STREET ADDRESS	10670 N. CENTRAL EXPWY., SU	JITE 600		T ADDRESS			
CITY-ST-ZIP	DALLAS TX 75231		5.4 City-				
TITLE		DELETE	6.1 TITL€	U1 &11		Change Additi	
NAME			6.2 NAME	1		. —	
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-7IP			64 CITY-				

I do 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 to use the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver to use the same legal effect as if made under oath; that I am a supplemental annual report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes for the receiver and officer or director of the receiver the same legal effect as if made under oath; that

Blackar

246924700