

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002150

FILED
Mar 19, 2008
Secretary of State

Entity Name: SYMPRO, INC.

Current Principal Place of Business:

2200 POWELL ST. SUITE 1170
EMERYVILLE, CA 94608

New Principal Place of Business:

Current Mailing Address:

2200 POWELL ST. SUITE 1170
EMERYVILLE, CA 94608

New Mailing Address:

8550 NW 33RD STREET
SUITE 200
DORAL, FL 33122

FEI Number: 94-2990956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONNOR, JAMES R
Address: 2200 POWELL ST. SUITE 1170
City-St-Zip: EMERYVILLE, CA 94608

Title: VP () Delete
Name: PATON, CHRIS
Address: 300 SOUTH RIVERSIDE PLAZA FLR8
City-St-Zip: CHICAGO, IL 60606

Title: S (X) Delete
Name: BERRY, JAMES
Address: 270 PARK AVE
City-St-Zip: NEW YORK, NY 10017

Title: T (X) Delete
Name: STERN, ALAN
Address: JP MORGAN 270 PARK AVE
City-St-Zip: NEW YORK, NY 10081

Title: D (X) Delete
Name: SIMPSON, PAUL H
Address: ONE CHASE MANHATTAN PLAZA FLR 10
City-St-Zip: NEW YORK, NY 10081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BYRNE, MICHAEL
Address: 8550 NW 33RD STREET, SUITE 200
City-St-Zip: DORAL, FL 33122

Title: CFO (X) Change () Addition
Name: WILKENS, JOHN F
Address: 8550 NW 33RD STREET, SUITE 200
City-St-Zip: DORAL, FL 33122

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHN F WILKENS

CFO

03/19/2008

Electronic Signature of Signing Officer or Director

_____ Date