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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K83263

14. I do hereby certify that the information suinformation indicated on this annual topo I am an officer or director of the corporal appears in Block 12 or Block 13 if chapter

SIGNATURE:

(9)

SYNERGY FINANCIAL GROUP, INC.

FILED Jan 28 1997 8:00am Secretary of State

-Principal Plac 500 N.W. 108T PEMBROKE PII US		11214 SUITE	Mailing Address 11214 PINES BLVD. SUITE 233 PEMBROKE PINES FL 33026-4101									
		U\$						3. Date Incorporated or Qualified 04/25/1989		Date of Last R /12/1996	teport	
· ·	Place of Business	2a. Ma	alling Address					4. FEI Number		·	pplied For	
21		26						65-0123323			ot Applicable	
Suite, Apt.		27						5. Certificate of Status Desired	X		Additional equired	
: City & Stai	te	28 Ci	ty & State					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country	71	ρ	Co	ountry			8. This corporation has liability for	intangibl	le tax under s	. 199.032,	
24	25	29		30						X No		
	9. Name and Address of Curre	nt Register	ed Agent		81			10. Name and Address of New Re	gisterec	i Agent		
	NZALEZ, JORGE E				81	Nai	ne					
	14 PINES BLVD. TE 233				82	Stre	et Addre	ess (P.O. Box Number is Not Acceptat	ole)	- · · · · · · · · · · · · · · · · · · ·		
	MBROKE PINES FL 33026				83							
LEM	IDHORE FRIES FE SSUES											
					84	City	1		FI	85 Zip	Code	
11. Pursuant office or agent. I a	registered agent, or both, in the Stat am familiar with, and accept the oblic	e of Florida. gations of, Se	Such change was ection 607.0505, F	s authoriz Florida St	ed by atutes	the (corporati	oration submits this statement for the points board of directors. I hereby acception	ot the ap	of changing it pointment as	ts registered registered	
12.	Signariae (gardio) printed nome of registrico ac OFFICERS At			OTE: Register	·	nt sign	aturu require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	ID DIDECTOR	DC (N. 40	
TITLE	I PVS	- Control	DELETE		TITLE	•••••		ADDITIONS/CHANGES TO OFFIC	Eno An	Change	Addition	
NAME	GONZALEZ, JORGE E			- 1	NAME							
STREET ADDRESS	11214 PINES BLVD., SUITE 2	33		1,3	STREET	ADDRE	SS					
CITY-S1-ZIP	PEMBROKE PINES FL			1.4	CITY-SI	T-21P		•				
TITLE	TD		DELETE	2.1	TITLE					Change	Addition	
NAME	GONZALEZ, JORGE E.			2.2	NAME							
'STREET ADDRESS	11214 PINES BLVD., SUITE 2	33		2.3	STREET	ADORE	SS					
City - S1 - ZIP	PEMBROKE PINES FL		T or era		CITY-S	ST-ZIP						
TITLE			☐ DELETE	ł	TITLE					Change	Addition	
INAMÉ					NAME							
STREET ADDRESS					STREET		SS					
CITY-ST-ZIP TITLE			DELETE	····	CITY-S	ST-ZIP	-			Change	Addition	
NAME			LJ OLCCIC		NAME					L Uranys	TT VOUITION	
				1		ADOOL	en					
STREET ADDRESS CITY - ST - ZIP				- 1	STREET		33					
TITLE			DELETE		CHTY-SI THILE	1-217				☐ Change	Addition	
NAME			And have don't die		NAME					- Aumilla	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS					STREET	ADORF	ss					
CITY - ST - ZIP					CITY - ST		-					
BILE			DELETE		TITLE					Change	Addition	
NAME					NAME							
STREET ADDRESS					STREET	ADDRE	ss					
CITY - S1 - 71P				1	DITY_S1							

of qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the sort is true and accurate and that my signature shall have the same legal effect as if made under oath; that impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name