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Secretary of State

04-16-2003 90115 020 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L58930

10074431

1. Entity Name
SYNERGISTIC TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
670 WATERWOOD WAY MELBOURNE, FL 32940 US	670 WATERWOOD WAY MELBOURNE, FL 32940 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
188 Woodsmill Blvd		188 Woodsmill Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Cocoa Fl		City & State: Cocoa Fl	
Zip: 32926	Country: USA	Zip: 32926	Country: USA

4. FEI Number: 59-3004269 — ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

EDWARDS, JAMES B PD
~~470 WATERWOOD WAY~~
~~MELBOURNE, FL 32940~~
188 Woodsmill Blvd
Cocoa, Fl 32926

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
City FL Zip Code

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 ____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PD NAME: EDWARDS, JAMES B. STREET ADDRESS: 670 WATERWOOD WAY CITY-ST-ZIP: MELBOURNE, FL 32940	☐ Delete	TITLE: PD NAME: James B. Edwards STREET ADDRESS: 188 Woodsmill Blvd CITY-ST-ZIP: Cocoa, Fl 32926	☑ Change ☐ Addition
TITLE: STD NAME: MARGARET J. EDWARDS STREET ADDRESS: 670 WATERWOOD WAY CITY-ST-ZIP: MELBOURNE, FL 32940	☐ Delete	TITLE: STD NAME: Margaret J. Edwards STREET ADDRESS: 188 Woodsmill Blvd. CITY-ST-ZIP: Cocoa Fl 32926	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I 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 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: Margaret J. Edwards — 04/09/03 — 321-632-3359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)