

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000045383

FILED
May 03, 2008
Secretary of State

Entity Name: SYNERGY SERVICES UNLIMITED INC.

Current Principal Place of Business:

611 S. FEDERAL HIGHWAY, C 2 B
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2632 SW WILLOWOOD CIRCLE
PALM CITY, FL 34990

New Mailing Address:

611 S. FEDERAL HIGHWAY, C 2 B
STUART, FL 34994

FEI Number: 80-0051622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLEN, MICHELE A
2632 SW WILLOWOOD CIRCLE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

MILLEN, MICHELE A
3621 SW COQUINA COVE WAY
101
PALM CITY, FL 34990 US

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: MICHELE A. MILLEN

05/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLEN, MICHELE A
Address: 3621 SW COQUINA COVE WAY, 101
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MICHELE A. MILLEN

OFCR

05/03/2008

Electronic Signature of Signing Officer or Director

Date