2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 31, 2004 8:00 am Secretary of State

DOCUMENT # P01000051200 1. Entity Name SYNERGETIC SYSTEMS, INC.					03-31-2004 90015 033 ***150.00			
Principal Place of Business 2132 TIGERTAIL AVENUE COCONUT GROVE, FL 33133 Mailing Address 2132 TIGERTAIL AVENUE COCONUT GROVE, FL 33133								
O Bringing F	Place of Business	3. Mailing Address						
	COSvarina Con.	60 COSUOTI	na con.	J		1414 1210) b ilal ilolo (1911 00 14) 0	I BUILDE IN INDE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03282004	Chg-P	CR2E034 (10/03))	
City & Stal	gables, Florida	City & State Coral 9alles	FLond	4. FEI Numbe 61-1407			applied For Not Applicable	
Zip 3314	Country	^{Zip} 33/43	Country USA		of Status Desired	\$8.75 Ac	ditional	
	6. Name and Address of Current F	7. Name and	7. Name and Address of New Registered Agent					
DE BALTO	DDANO, SONIA C		Name					
2132 TIGERTRAIL AVENUE COCONUT GROVE, FL 33133			Street A	reet Address (P.O. Box Number is Not Acceptable) 60 COSUO FINA CONCOUSE				
0000110	1 ONOVE, 12 00100							
			Cityo	ral gables		FL 399	943	
	e named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or	registered agent, or both	n, in the State of F	lorida. I am familiar with	n, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	Registered Agent signati	ure required when reinstating)		DATE		
				 				
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0		~ ~~	\$5.00 May Be Added to Fees				
After M	ay 1, 2004 Fee will be \$550.0 OFFICERS AND D	Trust Fund Contrib	oution.	Added to Fees	CHANGES TO OF	FICERS AND DIRECTOR		
After M	ay 1, 2004 Fee will be \$550.0 OFFICERS AND D	Trust Fund Contrib	oution.	Added to Fees ADDITIONS/C		Change	RS IN 11	
10. TITLE NAME STREET ADDRESS	ay 1, 2004 Fee will be \$550.0 OFFICERS AND E PD LANIO, HORTENSIA 2132 TIGERTAIL AVENUE	Trust Fund Contrib	TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/C	rina ce	⊒change On COU'S €	☐ Addition	
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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: Mana & Blanco Maria E.Blanco 3/28/04 613-4378
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Descriptions