

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051200

Entity Name: SYNERGETIC SYSTEMS, INC.

FILED  
Mar 11, 2007  
Secretary of State

## Current Principal Place of Business:

PO BOX 330398  
COCONUT GROVE, FL 33233

## New Principal Place of Business:

121 ORQUIDEA AVENUE  
CORAL GABLES, FL 33143

## Current Mailing Address:

PO BOX 330398  
COCONUT GROVE, FL 33233

## New Mailing Address:

FEI Number: 61-1407831      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE BALTODANO, SONIA C  
60 CASUARINA CONCOURSE  
CORAL GABLES, FL 33143      US

## Name and Address of New Registered Agent:

BLANCO, MARIA E  
121 ORQUIDEA AVENUE  
CORAL GABLES, FL 33143      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: MARIA E. BLANCO

03/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LANIO, HORTENSIA  
Address: 60 CASUARINA CONCOURSE  
City-St-Zip: CORAL GABLES, FL 33143

Title: VD ( ) Delete  
Name: BALTODANO, SONIA  
Address: 60 CASUARINA CONCOURSE  
City-St-Zip: CORAL GABLES, FL 33143

Title: TD (X) Delete  
Name: BLANCO, MARIA E  
Address: 60 CASUARINA CONCOURSE  
City-St-Zip: CORAL GABLES, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LANIO, HORTENSIA  
Address: 121 ORQUIDEA AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

Title: VD (X) Change ( ) Addition  
Name: BLANCO, MARIA E  
Address: 121 ORQUIDEA AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIA E. BLANCO

VD

03/11/2007

Electronic Signature of Signing Officer or Director

Date