

# 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

1044

DOCUMENT # P01000075183

1. Entity Name  
SYNERGY REAL ESTATE HOLDINGS CORP.



04 JAN 20 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
930 S. STATE RD. 7  
PLANTATION, FL 33317

Mailing Address  
930 S. STATE RD. 7  
PLANTATION, FL 33317



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01212004 Chg-P CR2E034 (10/03)

4. FEI Number  
65-1127281

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEINTRAUB, PETER  
2650 N. MILITARY TRAIL, #150  
BOCA RATON, FL 33431

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

Amended AR is \$61.25

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
STERN, BEN  
930 S. STATE RD. 7  
PLANTATION, FL 33317 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
600027768176  
01/29/04--01024--021 \*\*158.75

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



# Division of Corporations

## Annual Report

Page 2

Document Number

**P01000075183**

Business Entity Name

**SYNERGY REAL ESTATE HOLDINGS CORP.**

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

### Officer/Director Name And Address

Title   
 Name (Last, First, Middle, Title)    
 -or- Entity Name   
 Street Address   
 City, State    
 Zip Code & Country

Title   
 Name (Last, First, Middle, Title)   
 -or- Entity Name   
 Street Address   
 City, State   
 Zip Code & Country

Title   
 Name (Last, First, Middle, Title)   
 -or- Entity Name   
 Street Address   
 City, State   
 Zip Code & Country

Title   
 Name (Last, First, Middle, Title)   
 -or- Entity Name   
 Street Address

2014



## Division of Corporations

## Annual Report

Page 1

Document Number

P01000075183

Business Entity Name

SYNERGY REAL ESTATE HOLDINGS CORP.

FEI Number

651127281

FEI Number Status

☐ Applied For ☐ Not Applicable ☒ CurrentCertificate of Status Desired ☒ Yes ☐ No \$8.75 each

## Principal Place of Business

Address

930 S. STATE RD. 7

Suite, Apt. #, etc.

City, State

PLANTATION

FL

Zip Code &amp; Country

33317

## Mailing Address

Address

930 S. STATE RD. 7

Suite, Apt. #, etc.

City, State

PLANTATION

FL

Zip Code &amp; Country

33317

## Name And Address of Registered Agent

Name (Last, First, Middle, Title) WEINTRAUB, PETER

-or- RA Business Name

Address

2650 N. MILITARY TRAIL, #150

Suite, Apt. #, etc.

City, State

BOCA RATON

FL

Zip Code &amp; Country

33431

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

own RA.

Registered Agent Signature

4 of 4

City, State  
Zip Code & Country

Title  
Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title  
Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

DP

Officer/Director Signature Ben Stern

Continue

Reset

Start Over

**Sunbiz Home Page**

**Public Access Help**