

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 15, 2004 8:00 am
Secretary of State

05-03-2004 90768 048 ***150.00

DOCUMENT # P03000076697 1. Entity Name SYNERGY PUBLISHING INTERNATIONAL CORP			
Principal Place of Business 635 CLEVELAND STREET- A CLEARWATER FL 33755		Mailing Address 635 CLEVELAND STREET A CLEARWATER FL 33755	
2. Principal Place of Business 13555 Automobile Blvd		3. Mailing Address 13555 Automobile Blvd	
Suite, Apt. #, etc. 130		Suite, Apt. #, etc. 130	
City & State Clearwater FL		City & State Clearwater FL	
Zip 33762		Zip 33762	
Country USA		Country USA	
4. FEI Number 01-0791077		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WATTAM, JOSEPH J. 1678 CAMBRIDGE DRIVE CLEARWATER FL 33756		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00. Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE CEO	NAME WATTAM, JOSEPH J	<input type="checkbox"/> Delete	
STREET ADDRESS 1678 CAMBRIDGE DRIVE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP CLEARWATER FL 33756			
TITLE VP	NAME WATTAM, SAMUEL T	<input type="checkbox"/> Delete	
STREET ADDRESS 1599 BELLAIRE LANE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP CLEARWATER FL 33764			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 			
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: <u>Joseph Wattam</u> 4/28/04 7275610121 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			