

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000152901

Entity Name: REAL SYNERGY, INC.

FILED  
May 06, 2008  
Secretary of State

## Current Principal Place of Business:

16021 SW 64 TERRACE  
MIAMI, FL 33193

## New Principal Place of Business:

## Current Mailing Address:

16275 SW 88 STREET  
PMB 153  
MIAMI, FL 33196

## New Mailing Address:

16021 SW 64 TERRACE  
MIAMI, FL 33193

FEI Number: 55-0887305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

D'LEON, SUSIE  
11201 SW 55TH STREET  
E-9 #148  
HOLLYWOOD, FL 33025 US

## Name and Address of New Registered Agent:

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:

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: D ( ) Delete  
Name: GUILLEN, RENE  
Address: 16021 SW 64 TERRACE  
City-St-Zip: MIAMI, FL 33193

Title: D ( ) Delete  
Name: SUSIE, D'LEON  
Address: 11201 SW 55TH STREET E-9 # 148  
City-St-Zip: HOLLYWOOD, FL 33025

Title: D ( ) Delete  
Name: GUILLEN, ANGELA  
Address: 16021 SW 64 TERRACE  
City-St-Zip: MIAMI, FL 33193

Title: D (X) Delete  
Name: EPPLER, PAUL  
Address: 16021 SW 64 TERRACE  
City-St-Zip: MIAMI, FL 33193

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: HAYDEE, GUILLERMO  
Address: 4500 SW 98 CT  
City-St-Zip: MIAMI, FL 33165

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

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: ANGELA GUILLEN

D

05/06/2008

Electronic Signature of Signing Officer or Director

Date