

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000003358

Entity Name: BINARY SYNERGISTICS, INC.

FILED
May 22, 2007
Secretary of State

Current Principal Place of Business:

3130 BIRD AVE
#12
COCONUT GROVE, FL 33133

Current Mailing Address:

3130 BIRD AVE
#12
COCONUT GROVE, FL 33133

FEI Number: 20-4081540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMONS, FOY H
14105 S.W. 82 AVE
MIAMI, FL 33158 US

New Principal Place of Business:

10 ARAGON AVE
908
CORAL GABLES, FL 33134

New Mailing Address:

10 ARAGON AVE.
908
CORAL GABLES, FL 33134

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: KELLER, KEVIN
Address: 3130 BIRD AVE #12
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KELLER, KEVIN
Address: 10 ARAGON AVE SUITE 908
City-St-Zip: CORAL GABLES, FL 33134

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: KEVIN KELLER

D

05/22/2007

Electronic Signature of Signing Officer or Director

_____ Date