

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131500

Entity Name: SYNERGISTIC LINES INC.

FILED  
Apr 25, 2007  
Secretary of State

## Current Principal Place of Business:

1448 CHAPMAN CIRCLE  
WINTER PARK, FL 32789 US

## New Principal Place of Business:

100 S. EOLA DRIVE  
PH# 215  
ORLANDO, FL 32801 US

## Current Mailing Address:

1448 CHAPMAN CIRCLE  
WINTER PARK, FL 32789 US

## New Mailing Address:

100 S. EOLA DRIVE  
PH# 215  
ORLANDO, FL 32801 US

FEI Number: 51-0611649

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DRAZEN, SUSAN  
1448 CHAPMAN CIRCLE  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

DRAZEN, SUSAN  
100 S. EOLA DRIVE  
PH# 215  
ORLANDO, FL 32801 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:

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: DRAZEN, SUSAN  
Address: 1448 CHAPMAN CIRCLE  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VP/T ( ) Delete  
Name: DRAZEN, SUSAN  
Address: 1448 CHAPMAN CIRCLE  
City-St-Zip: WINTER PARK, FL 32789 US

Title: S ( ) Delete  
Name: DRAZEN, SUSAN  
Address: 1448 CHAPMAN CIRCLE  
City-St-Zip: WINTER PARK, FL 32789 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: DRAZEN, SUSAN  
Address: 100 S. EOLA DRIVE PH# 215  
City-St-Zip: ORLANDO, FL 32801 US

Title: VP/T (X) Change ( ) Addition  
Name: DRAZEN, SUSAN  
Address: 100 S. EOLA DRIVE, PH # 215  
City-St-Zip: ORLANDO, FL 32801 US

Title: S (X) Change ( ) Addition  
Name: DRAZEN, SUSAN  
Address: 100 S. EOLA DRIVE, PH # 215  
City-St-Zip: ORLANDO, FL 32801 US

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: SUSAN DRAZEN

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date