

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000131500

Entity Name: SYNERGISTIC LINES INC.

FILED
Sep 16, 2008
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

21485 EAST DIXIE HIGHWAY
AVENTURA, FL 33180 US

Current Mailing Address:

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

New Mailing Address:

21485 EAST DIXIE HIGHWAY
AVENTURA, FL 33180 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
100 S. EOLA DRIVE
PH# 215
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

KOLTUN, JEFFREY M
557 NORTH WYMORE ROAD
SUITE 100
MAITLAND, FL 32751 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: JEFFREY M. KOLTUN

09/16/2008

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DRAZEN, SUSAN
Address: 21485 EAST DIXIE HIGHWAY
City-St-Zip: AVENTURA, FL 33180 US

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: SUSAN DRAZEN

PSTD

09/16/2008

Electronic Signature of Signing Officer or Director

Date