

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED  
 Sep 09 1998 8:00am  
 Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P94000075957 (8)**  
 1. Corporation Name  
**SYNERGY CONSTRUCTION GROUP, INC.**



Principal Place of Business <b>2506 WEST IDLEWILD AVENUE TAMPA FL 33614</b>	Mailing Address <b>2506 WEST IDLEWILD AVENUE TAMPA FL 33614</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>5908 N. Armenia Avenue</b> Suite, Apt. #, etc. <b>200</b> 22 <b>Tampa</b> City & State 23 <b>Tampa</b> City & State 24 <b>33603</b> Zip	2a. Mailing Address 25 <b>Hillsborough</b> Country 26 <b>Tampa</b> City & State 27 <b>Tampa</b> City & State 28 <b>33603</b> Zip	29 <b>Hillsborough</b> Country	30 <b>Tampa</b> City & State
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3. Date Incorporated or Qualified <b>10/14/1994</b>	
4. FEI Number <b>59-3283782</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**NARDELLI, LARRY P**  
**2506 WEST IDLEWILD AVENUE**  
**TAMPA FL 33614**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**5908 N. Armenia Avenue**  
 83 **Suite - 200**  
 84 City **Tampa** FL 85 Zip Code **33603**

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.  
 SIGNATURE *Larry P. Nardelli* DATE **8-13-98**

12. OFFICERS AND DIRECTORS

TITLE <b>PVST</b>	<input type="checkbox"/> DELETE
NAME <b>NARDELLI, LARRY P</b>	
STREET ADDRESS <b>2506 WEST IDLEWILD AVENUE</b>	
CITY-ST-ZIP <b>TAMPA FL 33614</b>	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>5908 N. Armenia Ave. - Suite 200</b>
1.4 CITY-ST-ZIP	<b>Tampa, FL 33603</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>000002636820</b>
6.3 STREET ADDRESS	<b>-09/11/98--01025--042</b>
6.4 CITY-ST-ZIP	<b>***165.00</b>

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (5/98)

SIGNATURE *Larry P. Nardelli* DATE **8-13-98**

**SYNERGY CONSTRUCTION GROUP, INC.**  
5908 W. Armenia Avenue Tampa, Florida 33603

August 13, 1998

Florida Department of State  
Division of Corporations  
Annual Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Subject: Synergy Construction Group, Inc.  
5908 N. Armenia Avenue  
Suite 200  
Tampa, Florida 33603

Reference: Annual Report Filing

Dear Dawn,

As per our conversation regarding the annual report for the above referenced company. I am writing this letter to remind you that we did not receive the first notice and as per your instructions I am forwarding this letter and the filing fee of One Hundred and Sixty Five (00/100) dollars.

To refresh your memory of our conversation:

In February of 1998 we applied for a corporate name change from PRO DIRECT INC. to SYNERGY CONSTRUCTION GROUP, INC. Included with the package requesting the name change were the required fees necessary for the name change, and a new certificate. We received the new certificate and were expecting a new annual report, however, never received the first notice but to my dismay received a 2<sup>nd</sup>. notice.

Please notice the address as noted in the required box.

Yours sincerely,



Larry P. Nardelli  
President