

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 29 1997 8:00 am
Secretary of State

DOCUMENT # P94000092563 (3)

1. Corporation Name
SYNADYNE II, INC.



Principal Place of Business
8000 N. FEDERAL HIGHWAY
BOCA RATON FL 33487

Mailing Address
8000 N. FEDERAL HIGHWAY
BOCA RATON FL 33487-1620

3. Date Incorporated or Qualified
12/22/1994

3a. Date of Last Report
03/14/1996

2. Principal Place of Business
21 1144 E. Newport Center Drive
Suite, Apt. #, etc.

2a. Mailing Address
26 1144 E. Newport Center Drive
Suite, Apt. #, etc.

4. FEI Number
65-0021598
Applied For
Not Applicable

22 City & State
23 Deerfield Beach FL

27 City & State
28 Deerfield Beach FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 Zip Country
24 33442 25 USA

28 Zip Country
29 33442 30 USA

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33442 25 USA

29 33442 30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NUGENT, BRIAN M
106 E. COLLEGE AVENUE
SUITE 1200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Robert A. Leford
83 Street Address (P.O. Box Number is Not Acceptable)
84 1144 E. Newport Center Drive
85 City
86 Deerfield Beach FL
87 Zip Code
88 33442

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 *Robert A. Leford* DATE 1/12/97
Signature, typed or printed name of registered agent and file # applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> DELETE |
|-------|----------------------|------------------------|-----------------|-------------------------------------|
| PD | BURRELL, PAUL M | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input type="checkbox"/> |
| VP | BELLO, JOSEPH F | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input type="checkbox"/> |
| T | TOMLINSON, ROBERT E | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input type="checkbox"/> |
| SD | SCHUBERT, LAWRENCE H | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input checked="" type="checkbox"/> |
| D | MORELLI, LOUIS A | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input checked="" type="checkbox"/> |
| D | SCHUBERT, ALAN E | 8000 N FEDERAL HIGHWAY | BOCA RATON FL | <input checked="" type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|---------------------------|------------|------------------------------|--------------------------|---|
| Vice President + Director | | 1144 E. Newport Center Drive | Deerfield Beach FL 33442 | <input checked="" type="checkbox"/> |
| President + Director | | 1144 E. Newport Center Drive | Deerfield Beach FL 33442 | <input checked="" type="checkbox"/> |
| Treasurer + Director | | 1144 E. Newport Center Drive | Deerfield Beach FL 33442 | <input checked="" type="checkbox"/> |
| Secretary | David Hinz | 1144 E. Newport Center Drive | Deerfield Beach FL 33442 | <input checked="" type="checkbox"/> |

14. I do 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.

SIGNATURE: *Paul M. Burrell* 1/9/97 (954) 418-6428
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)