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May 17, 1999 8:00 am  
Secretary of State

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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P 96000074452(9)  
1. Corporation Name  
SYNERGY INTERNATIONAL INC.

Principal Place of Business Mailing Address  
704 TEAL AVE 704 TEAL AVE  
CELEBRATION CELEBRATION  
FL 34747 FL 34747

2. Principal Place of Business 2a. Mailing Address  
21 704 TEAL AVE 26 704 TEAL AVE  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22  
23 City & State 27 City & State  
CELEBRATION, FL CELEBRATION, FL  
24 Zip 25 Country 29 Zip 30 Country  
34747 US 34747 US

DO NOT WRITE IN THIS SPACE  
3. Date Incorporated or Qualified  
09/04/1996  
4. FEI Number  
65-0759288  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees  
8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
MILLER, ANTHONY  
704 TEAL AVENUE  
CELEBRATION FL 34747  
10. Name and Address of New Registered Agent  
81 Name MILLER ANTHONY  
82 Street Address (P.O. Box Number is Not Acceptable)  
704 TEAL AVENUE  
83  
84 City CELEBRATION FL 85 Zip Code 34747

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 *Anthony Miller* ANTHONY MILLER 5/19/99  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE P  
NAME MILLER ANTHONY  
STREET ADDRESS 704 TEAL AVENUE  
CITY-ST-ZIP CELEBRATION FL 34747  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE P  
1.2 NAME MILLER ANTHONY  
1.3 STREET ADDRESS 704 TEAL AVENUE  
1.4 CITY-ST-ZIP CELEBRATION, FL 34747  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *Anthony Miller* ANTHONY MILLER 5/19/99 407-566-922  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)