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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Secretary of State

Sandra B. Morthan

Sccretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097664 (2)

SYNDETIK, INC.

STREET ADDRESS

Principal Plac	ee of Business	М	ailing Address							
1010 S. OCEAN BLVD. #1707		1010 S. OCEAN BLVD. #1707								
POMPANO BEACH FL 33062			POMPANO BEACH FL 33062-6636							
							3. Date Incorporated or Qualified 11/27/1996	3a. D.	ate of Last R	leport
2. Principal F	Place of Business	2a.	Mailing Address				4. FEI Number		TA _C	oplied For
21		26	26				applied for		<u> </u>	ot Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22			27			·	C. Certificate of Orango Elegifica		Fee Re	equired
City & State			City & State				6. Election Campaign Financing	_	\$5.00	
Zip	Country	28	Zip	Countr			Trust Fund Contribution		Added 1	
24	25	29	24)	├ ─-¬	у		8. This corporation has liability for	_ ` -		. 199.032,
<u> </u>	9, Name and Address of Curren		tered Agent	30			florida Statutes 10. Name and Address of New Re	Yes [
MILE	RRAY, ANTHONY P	× · ·	x 2.11 - 1111	81	i i	Name		g. 51010U		
	S. OCEAN BLVD.				J.,					
#1707				82	2 5	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)		
	IPANO BEACH FL 33062			83	3					
. •					J					
				84	* `	Dity		FL	85 Zip (Code
office or agent. I a	ım tamıllar with, and accept the obliga	auons o	I, Section 607.0505, F	londa Statute	98.		oration submits this statement for the pion's board of directors. I hereby accept		ointment as	s registered registered
12.	Signature, typed or printed narro of registered age OFFICERS ANI				gent s	signature requir	ed when teinstalling)	DATE		0.00
TITLE	D OF FICE NS AIN) DIME	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	JERS AND	Change	S IN 12 Addition
NAME	MURRAY, GEORGE E		C) State	1.2 NAME					Change	LI Madition
STREET ADDRESS	1010 S. OCEAN BLVD #1707			1.3 STREE	a a n	DDLCC				
CITY-ST-ZIP	POMPANO BEACH FL 33062									
TITLE	D		DELETE		1.4 C(TY+ST-ZIP 2 T TILLE				Change	Addition
NAME	GREENE, JILL A		_	2.2 NAME		ŀ			LLL CHANGE	
STREET ADDRESS	1010 S. OCEAN BLVD #1707			2.3 \$1600	TAD	DRESS		-		
CITY-ST-ZIP	POMPANO BEACH FL 33062			2 4 CITY						
TITLE	D		DELETE	3.1 1DLE					Change	Addition
NAME	GREENE, WALLACE J			3.2 NAME					•	
STREET ADDRESS	1010 S. OCEAN BLVD #1707			3.3 STREE	T AĐ	DRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33062			3.4 CITY						
TITLE			DELETE	4.1 TITLE			· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				4 2 NAME					-	•
STREET ADDRESS				4 3 STREE	I ADI	DRESS				
CITY-ST-ZIP	<u> </u>			4.4 CITY-						
TITLE			DELETE	511011					Change	☐ Addition
NAME				5.2 NAME						
STREET ADDRESS				5 3 STREE	T ADI	DRESS				
CITY-ST-ZIP				5.4 CITY-	\$1 - Z	'IP				
TITLE			DELETE	6171111		<u> </u>			Change	Addition
NAME				6.2 NAME					-	

63 STREET ADDRESS

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 eath; 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.