

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 07, 2003 8:00 am**  
**Secretary of State**

02-07-2003 90091 005 \*\*\*150.00

DOCUMENT # P98000028014

1. Entity Name  
SYNERGIE HOLDINGS LIMITED, INC.



Principal Place of Business  
16776 BERNARDO CENTER DR., STE 203  
SAN DIEGO CA 92128

Mailing Address  
16776 BERNARDO CENTER DR., STE 203  
SAN DIEGO CA 92128

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 91-1853701

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHWARTZ GOLD COHEN ZAKARIN & KOTLER, P.A.  
% EDWARD COHEN, ESQ.  
54 SW BOCA RATON BLVD.  
BOCA RATON FL 33432-4708

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Edward Cohen, Esq.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ D ☐ Delete  
NAME MENICK, N. MUNRO ESQ  
STREET ADDRESS 15022 PASEO DEL MAR  
CITY-ST-ZIP DEL MAR CA 92014

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME PARKER, ROBERT  
STREET ADDRESS 415 CHESTNUT AVE., #C  
CITY-ST-ZIP CARLSBAD CA 92008

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ X ☐ Delete  
NAME GLENN, A J III  
STREET ADDRESS 1505 SUNNYBROOK FARM ROAD  
CITY-ST-ZIP ATLANTA GA 30350

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ C ☐ Delete  
NAME Charles Kallmann  
STREET ADDRESS 11944 Caminito Coriente  
CITY-ST-ZIP SAN DIEGO, CA 92128

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ D ☐ Delete  
NAME Michael Brette, JD  
STREET ADDRESS c/o VentureNet Technologies  
CITY-ST-ZIP 27349 Jefferson Ave #200 Temecula, CA 92590

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ D ☐ Delete  
NAME ARTHUR BLANK  
STREET ADDRESS c/o Technology Ventures  
CITY-ST-ZIP 2055 Yillage Parkway #108 Encinitas, CA 92024

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31 Dec-02

Date

Daytime Phone #

CR2E034 (10/02)