

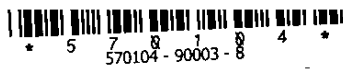
FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90002 016 \*\*\*150.00

PKUFI CORPORATION ANNUAL REPORT 1999  
FLORIDA DEPARTMENT OF STATE  
Katherine Harris Secretary of State  
DIVISION OF CORPORATIONS



DOCUMENT # P98000068188  
1. Corporation Name  
SYNERGY CORPORATE CONSULTANTS, INC



Principal Place of Business: 1801 SABEL DR DEERFIELD BEACH FL 33442  
Mailing Address: PO BOX 4246 DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 7/31/98  
4. FEI Number: 65-0855803  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
8. This corporation owes the current year intangible Personal Property Tax: No

9. Name and Address of Current Registered Agent  
RICHARD L PARKE  
PO BOX 4246  
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent  
81 Name: RICH PARKE  
82 Street Address (P.O. Box Number is Not Acceptable): 1801 SABEL DRIVE  
84 City: DEERFIELD BEACH FL 85 Zip Code: 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: [Signature] DATE: [Blank]

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, 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: [Signature] DATE: 4/30/99 DAYTIME PHONE: 561-212-9853

CR2E034 (1/98)