

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # S55176

(9)

1. Corporation Name

SYNTHETIC IMAGES, INC.

FILED

1995 JUL 27 AM 10:18

TALLAHASSEE, FLORIDA

Principal Place of Business
5454 HOFFNER AVE. STE 102
ORLANDO FL 32812

Mailing Address
5454 HOFFNER AVE. STE 102
ORLANDO FL 32812

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/23/1991

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3106282

Applied For
Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAMPAYO, CARLOS A
1416 NEWBRIDGE LN.
ORLANDO FL 32825

01 Name

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

03

04 City

FL

05 Zip Code

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) (Typed or printed name of registered agent and title of agent)

(Signature) (Typed or printed name of registered agent and title of agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

PD
SAMPAYO, CARLOS A
1416 NEWBRIDGE LN.
ORLANDO FL 32825

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP