## SYNERGX SYSTEMS INC Form 3 June 06, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person <u>*</u> Koenig A		oorting	2. Date of Event Re Statement (Month/Day/Year)	equiring	3. Issuer Name and Ticker or Trading Symbol SYNERGX SYSTEMS INC [SYNX]								
(Last)	(First)	(Middle)	10/01/2005		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)					
209 LAFAY	ETTE AV	ENUE											
	(Street)				(Check	all applicable	)	6. Individ	ual or Joint/Group				
SYOSSET,Â	NY 117	'91			Director X Officer (give title below President C	Othe	ow)	_X_ Form Person	eck Applicable Line) filed by One Reporting filed by More than One Person				
(City)	(State)	(Zip)	Tab	ole I - N	Non-Derivative Securities Beneficially Owned								
1.Title of Secur (Instr. 4)	rity		Ben	mount of eficially ( tr. 4)	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ership	rect Beneficial				
Reminder: Repowned directly		ate line for ea	ch class of securities	s benefici	<sup>ally</sup> SI	EC 1473 (7-02	2)						
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.													
Т	able II - Der	ivative Secur	rities Beneficially O	wned (e.	g., puts, calls,	warrants, op	tions, o	convertible	securities)				
1. Title of Deri (Instr. 4)	vative Securit	Expir	te Exercisable and ration Date /Day/Year) Expiration	Securitie	and Amount of es Underlying ve Security )	Conversi or Exerc Price of Derivativ	ise F D ve S	Ownership orm of Derivative ecurity:	6. Nature of Indirect Beneficial Ownershi (Instr. 5)				
		Date	Expiration			Cit	D	(D)					

Exercisable

Date

Title

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

3235-0104

January 31,

2005

0.5

Number:

Expires:

response ...

Estimated average burden hours per

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
Koenig Albert S 209 LAFAYETTE AVENUE SYOSSET, NY 11791	Â	Â	President Casey Systems Inc.	Â				
Signatures								
Albert S Koenig 06/0	)6/2007							
<u>**</u> Signature of Reporting Person	Date							

## **Explanation of Responses:**

No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.