## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P00000057377** 

1. Entity Name

SERENDIPITEA ENTERPRISES & MANAGEMENT, INC.



FILED
May 03, 2007 08:00 AM
Secretary of State

Daytime Phone #

Principal Place of Business

Mailing Address

16770 PRATO WAY NAPLES, FL 34110 16770 PRATO WAY NAPLES, FL 34110



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04242007	No Chg-P	GR2E034 (11/05)	

4. FEI Number Applied For S9-3655025 Not Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCQUAIG, DAVID H 4745 SUTTON PARK COURT, SUITE 103 JACKSONVILLE, FL 32224

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the obligations of registered agent.									
SIGNATURE.	Signature, lyped or printed name of registered agent and title if	applicable (NOTE: Registered	J Agent signature	e required when reinstaling)		ATE			
	E NOW!!! FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS			1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT MEDIATE, LINDA 16770 PRATO WAY NAPLES, FL 34110								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCQUAIG, DAVID H 4745 SUTTON PARK COURT, SUITE 103 JACKSONVILLE, FL 32224				U0000075 05/24/07-80	8845 018-023 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MEDIATE, ROCCO A 16770 PRATO WAY NAPLES, FL 34110			DO	NOT WRI	TE			
THELE NAME STREET ADDRESS CITY-SI-ZIP				IN )	THIS SPA	CE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.									

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