


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2005 8:00 am
Secretary of State


08-30-2005 90029 001 ***158.75

| | |
|----------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # P02000032330 |  |
| 1. Entity Name SERGO INTERNATIONAL, INC. | |

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| Principal Place of Business 3825 NE INDIAN RIVE DR JENSEN BEACH, FL 34957 | Mailing Address 43 SEMINOLE STREET STUART, FL 34994 |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------|

50064000.

| | |
|--------------------------------------------|-------------------------------------------------|
| 2. Principal Place of Business | 3. Mailing Address 4394 NE SKYLINE DR |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State Jensen Bch, Florida | City & State Jensen Bch, Florida |
| Zip 34957 | Country FL |

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|  | |
| 08242005 | Chg-P |
| CR2E034 (10/03) | |
| 4. FEI Number 01-0670038 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent SERGO, DENA 3825 NE INDIAN RIVER DR JENSEN BEACH, FL 34957 | |
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | |
| FL Zip Code | |

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| 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 | DATE |
| (NOTE: Registered Agent signature required when reinstating) | |

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|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SERGO, RALPH 4394 NE SKYLINE DR JENSEN BEACH, FL 34957 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SERGO, DENA 3825 NE INDIAN RIVER DR JENSEN BEACH, FL 34957 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 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: Dena Sergo | Date: 8/24/05 772 Daytime Phone #: 370-9481 |

ATTACHMENT 50064000

PO2000032330

Please Return
Certificate of Status
to correct address.

D. Sergio
4394 NE Skyline dr.
Jensen Bch FL
34957

Any Questions? CAFE
772 334 4465
772 370-9481
Cell