

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90424 010 ***150.00

DOCUMENT # P02000077315

1. Entity Name
SERBRENXI CORP.



Principal Place of Business
**TATUM WATERWAY 7775 DR #8
MIAMI BCH FL 33141**

Mailing Address
**TATUM WATERWAY 7775 DR #8
MIAMI BCH FL 33141**

2. Principal Place of Business

625 82ND Street

3. Mailing Address

625 82nd Street

Suite, Apt. #, etc.

2

Suite, Apt. #, etc.

2

☐ CHECK HERE IF MAKING CHANGES

City & State
Miami Beach, Florida

City & State
Miami, Beach, Florida

4. FEI Number
16-1617548

Applied For
Not Applicable

Zip
33141

Country
USA

Zip
33141

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**URDANETA, MAIRA
7220 NW 36 ST STE 601
MIAMI FL 33141**

7. Name and Address of New Registered Agent

Name **RAMOS SILVIA**
Street Address (P.O. Box Number is Not Acceptable)
625 82ND Street #2
City **Miami Beach** FL Zip **33141**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/16/03

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☒ Delete
NAME **URDANETA, MAIRA**
STREET ADDRESS **7220 NW 36 ST STE 601**
CITY-ST-ZIP **MIAMI BCH FL 33141**

TITLE **DV** ☐ Delete
NAME **MONTOYA, EDWARD**
STREET ADDRESS **TATUM WATERWAY 7775 DR #8**
CITY-ST-ZIP **MIAMI BCH FL 33141**

TITLE **DV** ☒ Delete
NAME **RAMOS, SILVIA**
STREET ADDRESS **TATUM WATERWAY 7775 DR #8**
CITY-ST-ZIP **MIAMI BCH FL 33141**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Change ☒ Addition
NAME **RAMOS, SILVIA**
STREET ADDRESS **625 82ND Street #2**
CITY-ST-ZIP **Miami Beach, Florida. 33141**

TITLE **DV** ☒ Change ☐ Addition
NAME **MONTOYA, EDWARD**
STREET ADDRESS **625 82ND Street #2**
CITY-ST-ZIP **Miami Beach, Florida. 33141**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/16/03

Date

Daytime Phone #

CR2E034 (10/02)