

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90169 014 ***150.00

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DOCUMENT # P02000109095

1. Entity Name
SERPE ENTERPRISES, INC.



Principal Place of Business
**1122 WATERVIEW LANE
WESTON FL 33326-2928**

Mailing Address
**1122 WATERVIEW LANE
WESTON FL 33326-2928**

2. Principal Place of Business

3. Mailing Address
P.O. Box 267032

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Weston, FL

4. FEI Number
03-0485999

Applied For
Not Applicable

Zip

Country

Zip
33326

Country

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

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SERPE, BRETT
1122 WATERVIEW LANE
WESTON FL 33326-2928**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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: *Brette Serpe* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **President / CEO 4/28/03 (954)325-3301**
Date Daytime Phone #

CR2E034 (10/02)