2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT										
DOCUMENT # P04000098277							ŧ	لما سا سا .		
1. Entity Name SEROFIN AVALOS, INC.						2005 OCT 10 PH 4: 58				
Principal Plac	e of Busines		Mailing Address	WO WE IT	SECRETARY OF STATE TALLAHASSEE, FLORIDA					
814 NORTH	9TH AVENU		814 NORTH 9TH AVENUE			TALLAHASSEE, FLORIDA				
Wauchula,	FL 33873		WAUCHULA, FL 33873			/ 1/8/05 (0 = 1 = 0.50)				
2. Principal P	Place of Busin	iess	3. Mailing Address							
			Suite, Apt. #, etc.			[[[[[[[[[[BEIII BIBII GERL BEIII	83 3 6 81 6 3 5 58 	II IZBIBDI II IBBI	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			07062005	Chg-P	CR2E034 (10/0	3)	
City & State			City & State			4. FEI Numbe	['] 247390	· I -	Applied For Not Applicable	
Zip	Zip Country		Zip Coun		ntry		of Status Desired	□ \$8.75	Additional	
	6. Name	and Address of Curren	t Registered Agent				7. Name and Address of New Registered Agent			
POHLMAN, MARKS					Name Serafin Abalos					
801 WEST BAY DRIVE SUITE 518			1		Street Address (P.O. Box Number is Nat Acceptable) Enus					
LARGO, F			€ *							
					uchula		FL Z	3873		
	named entit tions of regist		or the purpose of changing it	ts register	ed office or registe	ered agent, or bot	h, in the State of Flo	rida. I am familiar w	ith, and accept	
SIGNATURE.	·									
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOWII! FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Financing Trust Fund Contribution.						0.00 May Be ded to Fees		rith s. 607.193(2)(not receive the pri		
10.	LDOD	OFFICERS AND		11.				CERS AND DIRECT		
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STREET ADDRESS CITY-ST-ZIP	-			1	EET ADORESS '-ST-ZIP					
indicated	d on this repo	rt or supplemental report	th this filing does not qualify fis true and accurate and that	l my signa	iture shall have the	same legal effec	t as it made under c	iath; that I am an offi	cer or director	
of the cor	rporation or t	he receiver or trustee emp	powered to execute this repo with all other like empowere	rtay≸requ	ired by Chapter 60	07, Florida Statute:	s; and that my name	appears in Block 1	0 or Block 11 if	
SIGNAT	rure. '	22-	Kis PX	-AV	<u> </u>	10-	5-05 8	63-781-	4351	
CIGITAL	. 	SIGNATURE AND TYPED	PRINTED NAME OF SIGNING OFFICE	A OHOIREC	TOR		Date	Daytime Phon	e #	

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Serofin Avalos, Inc. 814 North 9th Avenue Wauchula, FL 33873

Florida Department of State Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Reinstatement of SEROFIN AVALOS, INC.

To Whom It May Concern:

Back in July we sent the Annual Report with our check number 516 and apparently failed to include our Federal Identification Number. When we contacted the Division of Corporations today and spoke with a representative we discovered that we did not receive the letter requesting the FIN. We have re-signed the Annual Report with an original signature and hereby request that we be reinstated as you have already deposited and cashed our payment.

Thank you in advance for you kindness and assistance in this matter.

Sincerely, Seasin atalos

President