


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 8:00 am
Secretary of State

02-27-2008 90017 021 ***150.00

DOCUMENT # P06000145291

1. Entity Name
SERO INVESTMENTS CORPORATION



Principal Place of Business 8370 WEST FLAGLER STREET SUITE 250 MIAMI, FL 33144	Mailing Address 8370 WEST FLAGLER STREET SUITE 250 MIAMI, FL 33144
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40033956

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.



02112008 Chg-P CR2E034 (12/06)

City & State	City & State
Zip	Country

4. FEI Number 65-1061265	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**JOSEPH M. WEHBY, P.A.
 8370 WEST FLAGLER STREET
 SUITE 250
 MIAMI, FL 33144**

7. Name and Address of New Registered Agent

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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE D	<input checked="" type="checkbox"/> Delete
NAME WEHBY, JOSEPH M ESQ.	
STREET ADDRESS 8370 WEST FLAGLER STREET #250	
CITY-ST-ZIP MIAMI, FL 33144	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DIPIS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BONILLA, SERGIO J.	
STREET ADDRESS 8370 W. FLAGLER ST. # 250	
CITY-ST-ZIP MIAMI, FL. 33144	
TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WEHBY, JOSEPH M. ESQ.	
STREET ADDRESS 8370 W. FLAGLER ST. # 250	
CITY-ST-ZIP MIAMI, FL. 33144	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby 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.

SIGNATURE: *Sergio J. Bonilla* **SERGIO J. BONILLA, PRESIDENT 305-554-5300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **2/12/08** Daytime Phone # _____