FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000002158 (2)

SERO, INC.

Principal Place of Business Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



7331 RIPLEY O ORLANDO FL S		7331 RIPLEY COURT ORLANDO FL 32836-372	7331 RIPLEY COURT ORLANDO FL 32636-3723								
						3. Date Incorporated or Qualified 01/04/1993	3a. Da	te of L 08/19	-	oort	
	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For				
1		26	• ·····			59-3159451			Not a	Applicable	
Suite, Apt. :		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State		City & State	28			Election Campaign Financing Trust Fund Contribution	☐ Added to Fees				
Zip 4	Country 25	7ip 29	30 Cou							99.032,	
	9. Name and Address of Curr	rent Registered Agent				10. Name and Address of New Re	gistered	Agent			
	ton, heidi v			81	Name						
	I RIPLEY COURT ANDO FL 32836					Iress (P.O. Box Number is Not Acceptab	le)				
				83							
				84	City		FL	85	Zip Co	ode	
agent. I a: SIGNATURE	n familiar with, and accept the ob	ligations of, Section 607.0505,	Florida Stat	utes.		poration submits this statement for the p ation's board of directors. I hereby accep		enang ointme	nt as re	registered egistered	
	Signature, typod or printed name of registered	ngent and tele if applicable (N AND DIRECTORS		d Agen	t signature requ	red when romstating) ADDITIONS/CHANGES TO OFFIC	DATE.	רוחרי	ODO.	161 40	
12. TITLE	D	DELETE	13.	T E		ADDITIONS/CHANGES TO OFFIC	ERS ANL	Ch		Addition	
NAME	GRATON, HEIDI V		12 N/		1				1.1gc	- Produitor	
STREET ADDRESS	7331 RIPLEY COURT			1.3 STREET ADDRESS							
CITY-ST-ZIP	ORLANDO FL		1,4 0								
TITLE	T	☐ DELETE	2.1 11					☐ Ch	ange	Addition	
NAME	GRATON, WAYNE		2.2 N/	2.2 NAME							
STREET ADDRESS	7331 RIPLEY COURT		2.3 ST	2.3 STREET ADDRESS							
CITY-ST-ZIP	ORLANDO FL		2.4 C	ITY - \$T	r- ZIP	· · · · · · · · · · · · · · · · · · ·					
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NAME			3.2 N/	AME.							
STREET ADDRESS			3.3 ST	REETA	ADDRESS						
CITY-ST-ZIP				11Y - S1	I - ZIP					1	
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NAME			4. 2 N								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE	***************************************	DELETE	4.4 CI 5.1 TI	1Y-S1	-7P			Ch	2000	Addition	
NAME		ET office	5.1 H					0"	90	Addition	
STREET ADDRESS					ADORESS						
CITY-ST-ZIP			1	14 - ST							
TITLE		DELETE	6.1 TI		٤11			☐ Ch	ange	Addition	
NAME			6.2 N/								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP	_			TY-ST							

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.

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