

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078786

Entity Name: SERRANO PAVING, INC

FILED  
Mar 24, 2004  
Secretary of State

## Current Principal Place of Business:

3117 WEST 71 PLACE  
HIALEAH, FL 33018

## New Principal Place of Business:

## Current Mailing Address:

3117 WEST 71 PLACE  
HIALEAH, FL 33018

## New Mailing Address:

FEI Number: 65-1134787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SERRANO, ARTURO  
3117 WEST 71 PLACE  
HIALEAH, FL 33018

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SERRANO, ARTURO  
Address: 3117 WEST 71 PLACE  
City-St-Zip: HIALEAH, FL 33018

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD ( ) Change (X) Addition  
Name: SERRANO, LEONOR  
Address: 3117 W 71 PLACE  
City-St-Zip: HIALEAH, FL 33018 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTURO SERRANO

P

03/24/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date