

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 01, 2008 8:00 am**  
**Secretary of State**

02-01-2008 90021 029 \*\*\*150.00

<b>DOCUMENT # P94000051434</b>					
<b>1. Entity Name</b> SERENE COMMUNICATIONS, INC.					
<b>Principal Place of Business</b> 1331 ADAMS ST HOLLYWOOD, FL 33019 US			<b>Mailing Address</b> 1331 ADAMS ST HOLLYWOOD, FL 33019 US		
<b>2. Principal Place of Business - No P.O. Box #</b> 5616 KATHERINE AVE		<b>3. Mailing Address</b> 5616 KATHERINE AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01152008    Chg-P    CR2E034 (12/06)	
<b>City &amp; State</b> VAN NUYS, CA		<b>City &amp; State</b> VAN NUYS, CA		<b>4. FEI Number</b> 65-0520155	
<b>Zip</b> 91401		<b>Country</b> U.S.		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  PAINTER, JAMES M 1300 N. FEDERAL HWY. SUITE 110 BOCA RATON, FL 33432			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PSTD <b>NAME</b> JUSTICE-REED, SERENE <b>STREET ADDRESS</b> 4711 NATICK AVE UNIT 131 <b>CITY-ST-ZIP</b> SHERMAN OAKS, CA 91403	<input type="checkbox"/> Delete		<b>TITLE</b> PSTD <b>NAME</b> JUSTICE-REED, SERENE <b>STREET ADDRESS</b> 5616 KATHERINE AVE. <b>CITY-ST-ZIP</b> VAN NUYS, CA 91401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> VP <b>NAME</b> REED, MARK <b>STREET ADDRESS</b> 1331 ADAMS STREET <b>CITY-ST-ZIP</b> HOLLYWOOD, FL 33019	<input type="checkbox"/> Delete		<b>TITLE</b> VP <b>NAME</b> REED, MARK <b>STREET ADDRESS</b> 5616 KATHERINE AVE. <b>CITY-ST-ZIP</b> VAN NUYS, CA 91401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
<b>SIGNATURE:</b> <i>Mark Reed</i> <i>MARK REED</i>			Date: <i>1-26-08</i> Daytime Phone #: <i>818-989-4230</i>		