

FILED
May 22, 2001 8:00 am
Secretary of State

FROM : SERRANO CORP

FAX NO. : 305 856 0069

04-17-2001 90061 024 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 629538

1. Entity Name
SERRANO IMPORT CORPORATION

Principal Place of Business 2200 S.W. 25 TERRACE MIAMI FL 33133	Mailing Address 2200 S.W. 25 TERRACE MIAMI FL 33133
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46107

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

4. PEI Number 59-2003874	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LADISA ARMANDO ESPINO 3481 CORNWAY 3RD FLOOR MIAMI FL 33145	7. Name and Address of New Registered Agent Name: Sylvia Palmer Street Address (P.O. Box Number if Not Applicable): 2200 SW 25TH City: MIAMI-FLA FL Zip Code: 33133
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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.

SIGNATURE: *[Signature]* DATE: _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$350.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fee
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P NAME: CUMBELLE, ANELIA STREET ADDRESS: SERRANO 32 CITY-ST-ZIP: SANTIAGO, CHILE	<input type="checkbox"/> Delete	TITLE: <i>[Signature]</i> NAME: <i>[Signature]</i> STREET ADDRESS: <i>[Signature]</i> CITY-ST-ZIP: <i>[Signature]</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: DIAZ, JUAN PABLO STREET ADDRESS: SERRANO 32 CITY-ST-ZIP: SANTIAGO, CHILE	<input type="checkbox"/> Delete	TITLE: <i>[Signature]</i> NAME: <i>[Signature]</i> STREET ADDRESS: <i>[Signature]</i> CITY-ST-ZIP: <i>[Signature]</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: ST. NAME: DIAZ, ANA MARIA STREET ADDRESS: SERRANO 32 CITY-ST-ZIP: SANTIAGO, CHILE	<input type="checkbox"/> Delete	TITLE: <i>[Signature]</i> NAME: <i>[Signature]</i> STREET ADDRESS: <i>[Signature]</i> CITY-ST-ZIP: <i>[Signature]</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete	TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(c), 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 trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other filing circumstances.

SIGNATURE: *[Signature]* DATE: **5-1-01** **305-856-0074**