## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Mar 19, 2007 8:00 am **DOCUMENT # 728450 Secretary of State** 1. Entity Name 03-19-2007 90066 027 \*\*\*\*61.25 SERENDIPITY ASSOCIATION, INC. Principal Place of Business Mailing Address 3231-3247 MCDONALD ST 3233 MCDONALD STREET **MIAMI FL 33133** MIAMI FL 33133 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0466344 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DE LACAMARA, ROSA Street Address (P.O. Box Number is Not Acceptable) BECKER & POLIAKOFF, P.A. 121 ALHAMBRA PLAZA 10TH FLOOR MIAMI FL 33134 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 \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 HILL PD ☐ Delete HILE ☐ Addition NAME LEESBERG KONIG, WALTER NAMI STREET ADDRESS 3243 MCDONLAD STREET STREET ADDRESS CITY - ST - ZIP **MIAMI FL 33133** CHY ST ZIP TD Delete TITLE Change ☐ Addition NAME REGER, AL NAME STREET ADDRESS 3233 MCDONALD STREET STRUET ADDIVISS CITY - ST- ZIP CHY-ST-ZIP MIAMI FL 33133 11111 🔀 Delete Change Change ■ Addition MCLISSA MARTINEZ NAME NAME ESTEVEZ ROSS BLOVIN, JOSEPH STREET ADDRESS 3241 MCDONALD ST 3239 MCDONALD ST STREET ADDRESS CITY - ST- ZIP CHY-ST 7IP MIAM! FL 33133 MIAMI FL 33/33 TITLE Delete HIH ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY ST ZIE CHY ST 7IP ШИ ☐ Defete HILL Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIE CITY-ST ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAMI NAME STRUET ADDRESS STREET ADDRESS CITY ST-ZIP CHY-ST 7P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11

SIGNATURE:

ALAN REGER

if changed, or on an attachment with an address, with all other like empowered.

3-6-07 305-448-0860

FILED