2004 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT							
DOCUMENT # F02000005575							
Entity Name SERENGETI ENTERPRISES, INC.				FILED			
Principal Place	e of Business	Mailing Address		20	04	1AY -4 A	M 9: 35
456 E. AVE. I		456 E. AVE. K-4, STE. 4		77	SECR	FTARY et	167-
LANCASTER,	CA 93535	LANCASTER, CA 93535		204	TALLA	ETARY UP HASSEE, P	OTATE LORINA
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			95-4728			Not Applicable	
e dans en en Este en en en			5. Certificate	of Status Desired		5 Additional lequired	
	6. Name and Address of Current Re	A Comment					
	VICES, INC.		. no	NOT W	RITE		
526 E. PAR	RK AVE. SSEE, FL 32301		The VALUE	X 再升 "我们你"			
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			end to be a second of the seco				
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 NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be							
	ay 1, 2004 Fee will be \$550.00	Trust Fund Contribution.		ed to Fees			
10.	OFFICERS AND DI	RECTORS					Calleral Substan
TITLE NAME	P KING, JEANNIE						
STREET ADDRESS	375 FANTASY ST.			7	ODOSE	1968	17
CITY-ST-ZIP	PALMDALE, CA 93551	·		05/1	00036 2/04=-0103	7==018+7**	*150.00
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STREET ADDRESS			Chic Harmon and Chic Services				
CITY-ST-ZIP	partiful that the information	in films does not could for the		(14,2,3,7,4)	N Florido Ctat	further continue	
12. I 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 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 aptdress, with all other like empowered.							
SIGNATURE: SIGNATURE AND DEED ON PRINTED NAME OF SHORMING OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date							9109-9018