

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90231 016 ***150.00

DOCUMENT # M30827

1. Entity Name
SERCO ENTERPRISE INC.



Principal Place of Business
**135 E PALM DR
POMPANO BEACH FL 33063
US**

Mailing Address
**135 E PALM DR
POMPANO BEACH FL 33063
US**

20015484



2. Principal Place of Business

1823 TAMARIND Lane

3. Mailing Address

P.O. BOX 93-4183

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

COCONUT CREEK, FL

City & State

MARGATE, FL

4. FEI Number **59-2666932**

Applied For
Not Applicable

Zip **33063**

Country **USA**

Zip **33093**

Country **USA**

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COTE, SERGE
135 E PALM DRIVE
MARGATE FL 33063**

Name

Street Address (P.O. Box Number is Not Acceptable)

1823 TAMARIND Lane

COCONUT CREEK FL 33063

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

1-17-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP COTE, SERGE 135 E PALM DRIVE MARGATE FL 33063	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST COTE, NANCY 135 E PALM DR MARGATE FL 33063	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1823 Tamarind Lane COCONUT CREEK, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1823 Tamarind Lane COCONUT CREEK, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/17/03 954-9611

CR2E034 (10/02)