(((H01000108137 0)))

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 18 PM 3:16

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P 000 000 71818

1. Corporation Name
SERENITY ASSET MANAGEMENT, INC.

REINSTATEMENT 01

2. Principal Office Address	3. Mailing Office Address
624 5th Key Drive	624 5th Key Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fort Lauderdale Fla	City & State: Fort Lauderdale Fla
Zip: 33304 Country: USA	Zip: 33304 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 7/27/2000

5. FEI Number: 65-1069057 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED $52.75 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: NASSAR, A.J.

Street Address (P.O. Box Number is Not Acceptable): 624 5th Key Drive

Suite, Apt. #, Etc.:

City: Fort Lauderdale Fla 33304 State: FL Zip Code: 33304

I hereby appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: _____ Date: 10-15-01

REGISTERED AGENT MUST SIGN

8. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director	A.J. Nassar	624 5th Key Drive	Ft Lauderdale / Fl / 33304

10/18

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

SIGNATURE: A.J. NASSAR 10-15-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

[redacted]

(((H01000108137 0)))

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000108137 0)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : FIELDSTONE LESTER SHEAR & DENBERG
Account Number : I19990000180
Phone : (305)357-5775
Fax Number : (305)357-5534

CORPORATION REINSTATEMENT

SERENITY ASSET MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$750.00

Electronic Filing Menu Corporate Filing Public Access Help