



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 06, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90172 045 \*\*\*150.00

<b>DOCUMENT # P00000095267</b>					
<b>1. Entity Name</b> SERRANO ENTERPRISE, INC.					
<b>Principal Place of Business</b> 12532 RIVERGLEN DRIVE RIVERVIEW, FL 33569			<b>Mailing Address</b> 12532 RIVERGLEN DRIVE RIVERVIEW, FL 33569		
<b>2. Principal Place of Business</b> 910 Oakfield Drive Suite, Apt. #, etc. Suite 202 City & State Brandon FL Zip 33511 Country USA		<b>3. Mailing Address</b> Same AS Above Suite, Apt. #, etc. City & State Zip Country			
04232004    Chg-P    CR2E034 (10/03)		<b>4. FEI Number</b> 59-3674884		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired..</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<b>6. Name and Address of Current Registered Agent</b> SERRANO, RAYMOND 12532 RIVERGLEN DRIVE RIVERVIEW, FL 33569	
<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL    Zip Code				<b>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.</b> SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> PSTD <b>NAME</b> SERRANO, RAYMOND <b>STREET ADDRESS</b> 12532 RIVERGLEN DRIVE <b>CITY-ST-ZIP</b> RIVERVIEW, FL 33569	<input type="checkbox"/> Delete		<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> Secretary Treasurer <b>NAME</b> Lynn C Serrano <b>STREET ADDRESS</b> 12532 Riverglen Drive <b>CITY-ST-ZIP</b> Riverview, FL 33569	<input type="checkbox"/> Delete		<b>TITLE</b> Secretary Treasurer <b>NAME</b> Lynn C Serrano <b>STREET ADDRESS</b> 12532 Riverglen Drive <b>CITY-ST-ZIP</b> Riverview, FL 33569	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME <b>STREET ADDRESS</b> CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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.</b>					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/23/04    813-657-8300 <small>Date    Daytime Phone #</small>		