2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 19, 2007 8:00 am Secretary of State

DOCUMENT # P05000112089 1. Entity Name 17738 SERENA LAKES, INC.					03-19-2007 90084 022 ***150.00				
Principal Place of Business Mailing Address			-		 -				
10477 SW 108TH AVE, #230 10477 SW 108TH AVE, # MIAMI, FL 33176 MIAMI, FL 33176		30	•	·					
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10314 5w 127 ct 10314 Suite, Apt. #, etc. Suite, Apt. #, etc.			جوا د	- CT					
Suite, Apt. #, etc.					01102007	Chg-P	CR2E034 (12/06	5)	
City & State City & State Hiami H					4. FEI Numbe 20-329		├	Applied For Not Applicable	
^{Zip} 331		33186	Country	†		of Status Desired	□ \$8.75 A Fee Requi		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
MIRABAL, MIGUEL F				Name Hirobal Hiquel 7					
2828 CORAL WAY SUITE 450			Street A	Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33155			20:	<u> </u>	escal	Way 501	te 530		
:			City H						
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 # applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing									
10.	OFFICERS AND D		11.	, ,	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTO	RS IN 11	
TITLE NAME	D DAGACH-IMBARACK, LEYLA	☐ Delete	TITLE NAME	A	ACH TA	1000000	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	10477 SW 108TH AVE, #230 MIAMI, FL 33176		STREET ADDRESS CITY-ST-ZIP	103	in sw mi F	nsairack 127 ct l 3318	-		
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CITY-ST-ZIP			CITY-ST-ZIP						
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TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	
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name Street address			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
12. I hereby o	certify that the information supplied with t	nis filing does not qualify for the	exemptions of	ontained	in Chapter 119	, Florida Statutes. I	further certify that the	information	

12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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 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:

YPED OB PRINTED HANGED FROMING OFFICER OR DIRECTOR

3/1/07

(906) 282 - 2010