

2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 05, 2008 8:00 am
Secretary of State**

02-04-2008 90061 007 ***150.00

1. Entity Name SERRANO AND ASSOCIATES CONSTRUCTION INC			
Principal Place of Business 6610 SW 17TH STREET POMPANO BEACH, FL 33068		Mailing Address 6610 SW 17TH STREET POMPANO BEACH, FL 33068	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 26-1194801		Applied For Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
SERRANO VAZQUEZ, EVELYN 6610 SW 17TH STREET POMPANO BEACH, FL 33068			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City			
FL Zip Code			
7. Name and Address of New Registered Agent			
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 remitting fees)			
DATE _____			
9. Election Campaign Financing Trust Fund Contribution. FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		<input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
P SERRANO VAZQUEZ, EVELYN 6610 SW 17TH STREET POMPANO BEACH, FL 33068		<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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.			
Evelyn Serrano <i>1/31/08 954-22</i> SIGNATURE: <i>Evelyn Serrano</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
Date _____			
Daytime Phone # _____			