

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000001297 (9)  
1. Corporation Name  
SERELAU CORP.

Principal Place of Business

1001 S. BAYSHORE DR  
2702  
MIAMI FL 33131-4900  
US

Mailing Address

1001 S. BAYSHORE DR  
2702  
MIAMI FL 33131-4900  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1992

4. FEI Number

65-0391301

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 1001 Brickell Bay Drive

Suite, Apt. #, etc.

22 2702

City & State

23 Miami, FL

Zip

24 33131-4940

Country

25 US

2a. Mailing Address

26 1001 Brickell Bay Drive

Suite, Apt. #, etc.

27 2702

City & State

28 Miami, FL

Zip

29 33131-4940

Country

30 US

9. Name and Address of Current Registered Agent

WAYNE, GEOFFREY M  
1001 S. BAYSHORE DR, SUITE 2702  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

1001 Brickell Bay Drive

83

Suite 2702

84

City  
Miami

FL

85

Zip Code  
33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DP  
CESAN, PIER F  
1001 S. BAYSHORE DR, #2702  
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S  
PULIGHEDDU, MARIA T  
1001 S. BAYSHORE DR, #2702  
MIAMI FL

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

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

CESANA, PIER F.

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3/13/98 (305) 381-8108

CR2E034 (10/97)