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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000004001 (2)**

1. Corporation Name
SERENA COVE HOLDINGS, INC.

Principal Place of Business
1221 BRICKELL AVENUE
SUITE 1800
MIAMI FL 33131
US

Mailing Address
1221 BRICKELL AVENUE #1800
MIAMI FL 33131-3260

3. Date Incorporated or Qualified: **01/12/1993**
3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business
21 8255 SW 152 AVE.
Suite, Apt. #, etc.
22 #101
City & State
23 MIAMI FL
Zip 24 33193 Country 25 DADE/USA

2a. Mailing Address
26 8255 SW 152 AVE.
Suite, Apt. #, etc.
27 #101
City & State
28 MIAMI FL
Zip 29 33193 Country 30 USA

4. FEI Number: **65-0382288** — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
PARAJON, LUIS
1221 BRICKELL AVENUE
SUITE 1800
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name PARAJON, LUIS
82 Street Address (P.O. Box Number is Not Acceptable) 8255 SW 152 AVENUE. #101
83 MIAMI
84 City MIAMI FL 85 Zip Code 33193

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: Luis Parajon VP — LUIS PARAJON 4/15/97
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	FARAH, EDWARD	
STREET ADDRESS	2121 S.W. 3RD AVENUE	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	TD	☐ DELETE
NAME	LUIS PARAJON	
STREET ADDRESS	C/O 1221 BRICKELL AVENUE #1800	
CITY-ST-ZIP	MIAMI FL	
TITLE	VD	☐ DELETE
NAME	RASHIDA MAMUJEE	
STREET ADDRESS	C/O 1221 BRICKELL AVENUE #1800	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	HONIBALL, ROBERT	
STREET ADDRESS	C/O 1221 BRICKELL AVENUE #1800	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	ALWIN POON TIP	
STREET ADDRESS	C/O 1221 BRICKELL AVENUE #1800	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	HUARTE, JUAN F	
STREET ADDRESS	C/O 1221 BRICKELL AVENUE #1800	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
1.4 CITY-ST-ZIP	MIAMI FL 33193	ADDRESS
2.1 TITLE		☒ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
2.4 CITY-ST-ZIP	MIAMI, FL 33193	
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
3.4 CITY-ST-ZIP	MIAMI, FL 33193	
4.1 TITLE		☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
4.4 CITY-ST-ZIP	MIAMI, FL 33193	
5.1 TITLE		☒ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
5.4 CITY-ST-ZIP	MIAMI FL 33193	
6.1 TITLE		☒ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS	c/o 8255 SW 152 AVE. #101	
6.4 CITY-ST-ZIP	MIAMI FL 33193	

CR2E034 (9/96)

14. I do 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: Luis Parajon VP — LUIS PARAJON 4/15/97 (305) 387 8786
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0174006