

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90152 010 \*\*\*150.00

**DOCUMENT # P94000028916**

1. Entity Name  
**SERENA INVESTMENT, INC.**



Principal Place of Business

**3431 PINE RIDGE RD.  
SUITE 101  
NAPLES, FL 34109 US**

Mailing Address

**3431 PINE RIDGE RD.  
SUITE 101  
NAPLES, FL 34109 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132004

Chg-P

CR2E034 (10/03)

4. FEI Number

**65-0533977**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WHITE, JOHN  
3431 PINE RIDGE ROAD  
SUITE 101  
NAPLES, FL 34109**

Name

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

City

**FL**

Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
NAME **WHITE, JOHN**  
STREET ADDRESS **3431 PINE RIDGE ROAD SUITE 101**  
CITY-ST-ZIP **NAPLES, FL 34109**

TITLE **SECRETARY + DIRECTOR** ☒ Change ☐ Addition  
NAME **WHITE, JOHN**  
STREET ADDRESS **3431 PINE RIDGE RD. STE 101**  
CITY-ST-ZIP **NAPLES FL 34109**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **PRESIDENT + DIRECTOR** ☐ Change ☒ Addition  
NAME **ZOLTAN H. ZSITVAY**  
STREET ADDRESS **P.O. BOX 578**  
CITY-ST-ZIP **NEW UENON, N.J. 07976**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V.PRES. + DIRECTOR** ☐ Change ☒ Addition  
NAME **IMY VONDEH HAGEN**  
STREET ADDRESS **13021 HAMILTON HARBOUR DR. # 510**  
CITY-ST-ZIP **NAPLES, FL 34110**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JOHN P. WHITE, SECRETARY**

Date

Daytime Phone #

**4-29-04 239-544-2013**