2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P95000009515

1. Entity Name

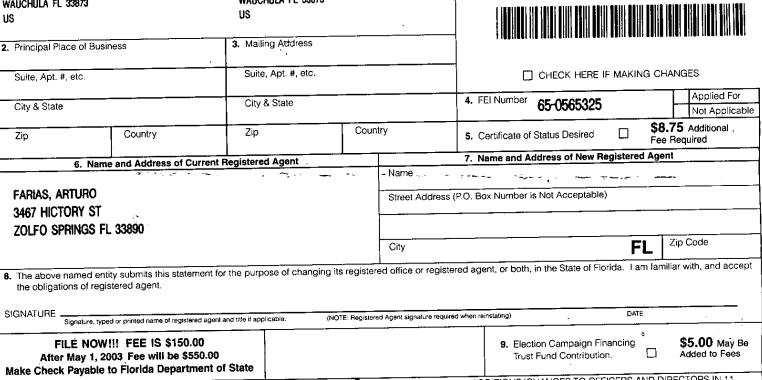
SERENO, INC.



Mailing Address Principal Place of Business PO BOX 2114 781 MARTIN LUTHER KING BLVD WAUCHULA FL 33873 WAUCHULA FL 33873 HS 2. Principal Place of Business Mailing Address

FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90183 019 ***150.00



ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 10. ☐ Addition ☐ Change TITLE Delete TITLE NAME JAIMES, ARTURO NAME STREET ADDRESS PO BOX 2114 STREET ADDRESS CITY-ST-ZIP WAUCHULA FL 33873 CITY-ST-7IP ----Change Addition TITLE ☐ Delete TITLE VD NAME JAINES, ANGEL NAME LAST NAME JAIMES STREET ADDRESS 769 MARTIN LUTHER KING STREET ADDRESS CITY-ST-ZIP WAUCHULA FL 33873 CITY-ST-ZIP ☐ Addition □ Change TITLE ☐ Delete TITLE SD NAME NAME JAIMES, ARELI 781-MARTIN'LUTHER:KINGFJR:BOX:2114* = STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WAUCHULA FL 33873 CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

I hereby certify that the information supplied with this filling 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 n address, with all other like empowered

SIGNATURE:

2/12/03 (863)