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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000010759 (4)

SERENE LAKE INVESTMENTS, INC.

## FILED May 01 1998 8:00am Secretary of State



Principal Place of	Business	Mailing Address							
10816 S.W. 188TH	I ST.	10816 S.W. 188TH ST.							
MIAMI FL 33157		MIAMI FL 33157							
					DO NOT WRITE IN THIS SPACE				
	_				3. Date Incorporated or Qualified 02/02/1996				
2. Principal Place	of Business	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26			65-0637671	/	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		Cily & State		6. Election Campaign Financing	\$	5.00	May Be		
23		28			Trust Fund Contribution		Added to Fees		
Zip	Country	Zip	Country		8. This corporation owes or has paid	the current y	rear Inta	angible	
24	25	29	30		Personal Property Tax due June 3			No No	
	Name and Address of Curren	it Registered Agent			10. Name and Address of New Reg	Istered Agen	<u>t</u>		
	RD, Albertyr 🚅		81	Name					
	S.W. 188TH ST. FL 33157		82	Street Add	ress (P.O. Box Number is Not Acceptable	э)			
			83						
			84	Citu		16-	7:	Yorks.	
			84	City		FL  85	Zip C	;oge	
11. Pursuant to th	provisions of Sections 607.050	2 and 607 1508, Florida Stati	ules, the above	named corp	poration submits this statement for the pu	rpose of char	iging its	registered	
office or regist	<b>ter</b> ed agent, or both, in the State <b>m</b> iliar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, f	s authorized by: Torida Statules.	the corporal	tion's board of directors. I hereby accept	the appointm	ent as i	registered	
SIGNATURE	. , , ,								
	ture, typed or printed name of requirement age	er aud tile if applicable (NC	DIE: Registered Agen	signature requi	red when reinstating)	DATE			
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRE	CTOR	S IN 12	
TITLE		☐ DELETE	1.1 TITLE				hange	Addition	
	<del>(</del> Oward, albert e		1.2 NAME						
	10816 S.W. 188TH ST.		1.3 STREET A	DDRESS					
CITY-ST-ZIP	MAMI FL 33157		1.4 CITY-ST-	ZIP					
TITLE		☐ DEL <b>ete</b>	2.1 TITLE			□ c	hange	Addition	
RAME			2.2 NAME						
STREET ADDRESS			23 STREFT A	DDRESS					
CITY-ST-ZIP			2 4 CITY-ST	- ŽIP					
TITLE		DELETE	3 1 TITLE			C	hange	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET A	DORESS					
CITY-ST-ZIP			3.4. CITY - ST	- ZIP					
TITLE		☐ DELETE	4.1 TITLE			□ c	hange	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET A	DDRESS					
CITY-ST-ZIP			4.4 CITY - ST-	ZIP				_	
TITLE		☐ DELET <b>e</b>	5.1 TITLE	İ		. ⊔ ¢	hange	Addition	
NAME			5.2 NAME	ł					
STREET ADDRESS			5.3 STREET A	DDRESS					
CITY-ST-ZIP	<u></u>		5.4 CITY - ST-	ZIP					
TITLE		☐ DELĒT <b>E</b>	6.1 TITLE			∐ C	hange	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET A	DORESS					
CITY-ST-ZIP	<del></del>		6.4 CITY-ST						
indicated on the	his annual report or supplementa	I annual report is true and ac	ccurate and that	my signatu	Section 119.07(3)(i), Florida Statutes. I fure shall have the same legal effect as if n	nade under oa	ath: tha	tlam an	
officer or direc	Mor of the cornecation or the reco	over or trustee empowered to	execute this re	port as req	uired by Chapter 607, Florida Statutes; ar	nd that my na	me app	ears in	
Block 12 of Bl	ock 13 if changed, or on an attac	minum with an address							