2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000093993						FILE	Ŋ			
1. Entity Nam SERPRO	TEC LIMITED CORP.			•		•				
					06	APR 11 P	M 12: 34			
Principal Place of Business Mailing Address					SE	CRETANT O LLAHASSEE	FSTAIL			
4410 SW 137 CT 4410 SW 137 CT					AT.	LLAHASSEE	, PLUKIUS	`		
MIAMI, FL 3:	31/3	MIAMI, FL 33175			1 /8871682 (16	1010 1950 50W 55W 50W	n 60110 (DISS 845 1	ne iliao m	****	
2. Principal P	lace of Business	3. Mailing Address								
2. (\						IEILI (BAI) QUAI BALII GDI	il 49118 ining 1915 ii	LIKE TENEE LII	KORI II IADI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			08232006	Chg-P	CR2E034	(11/05)		
City & State		City & State			4. FEI Number Applied Fo				·	
Zip Country		Zip Count		trv	65-0796	¢2		Not Applicable 3.75 Additional		
_					<u> </u>	of Status Desired	L Fee	Required		
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name and	Address of New R	egistered Age	nt		
DE OCA, JESUS M 4410 SW 137 CT				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL			Street Addition			5) . O. DON Multiple is that Acceptable)				
				City			FL	Zip Code	∌	
	named entity submits this statement ions of registered agent.	for the purpose of changing its	registere	ed office or register	red agent, or bot	h, in the State of Fic	orida. I am fam	iliar with,	and accept	
•										
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NOT	E: Registere	d Agent signature required	I when reinstating)		DATE			
E11	E NOWIII. FEE.IS.\$150.00	9. Election Campa	ign Finar	ncing \$5	.00 May Be					
	ay 1, 2006 Fee will be \$550			□ Ãodo	ed to Fees					
10.		ID DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DI	RECTORS	5 IN 11	
TITLE NAME	PD TORRES, LUIS E	☐ Delete	TITLE	·] Change	Addition	
STREET ADDRESS	4410 SW 137 CT STR			ET ADDRESS						
CITY-ST-ZIP	MIAMI, FL 33175		_	-\$1-ZIP				•		
TITLE NAME		Delete	TITLE				L.] Change	☐ Addition	
STREET ADDRESS	■ ¹			ET ADORESS						
CITY-ST-ZIP		-		-ST-ZIP				1 Change	☐ Addition	
TITLE NAME		☐ Delete	TITLE				L	j Cilange	☐ Addition	
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP		☐ Delete	TITU	-ST-20P		<u>–</u>] Change	☐ Addition	
NAME		ш оскае	NAM	I	60	00739	_			
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP	05/03/	00739 '0601030-	-029 **	¥150.0	00	
TITLE		☐ Delete	TITL) Change	☐ Addition	
NAME			NAM	-						
STREET ADDRESS CITY-ST-ZIP				ET ADORESS -ST-ZIP						
mu) Delete	TITU] Change	Addition	
NAME OVER ADDRESS		\	NAM	E ET ADORESS						
STREET ADDRESS City-St-ZIP		} /		-ST-ZIP						
12. I hereby	certify that the information supplied v	th this filing does not qualify for	or the ex	emptions containe	d in Chapter 119	, Florida Statutes. I	further certify	that the in	nformation or director	
indicated on this report or supplemental report is frue and argurate 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 appreciate the proposed of the corporation of 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										
Musta 11/3										
SIGNAT	URE:SIGNATURE AND TYPED O	PRINTED HAME OF SIGNING OFFICER	R OR DIREC	TOR TOR	,,,,	Oats	Daytir	ne Phone #		
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