## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

## Mar 18, 2004 08:00 AM Secretary of State DOCUMENT # S94492 1. Entity Name SERÉEN, INC. Principal Place of Business Mailing Address 122 WEST ATLANTIC AVE 122 WEST ATLANTIC AVENUE DELRAY BEACH, FL 33444 US DELRAY BEACH, FL 33444 02252004 No Chg-P CB2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0299553 Not Applicable \$8.75 Additional 5. Certificate of Status Desired\_ Fee Required 6. Name and Address of Current Registered Agent HAMDAN, AMJED DO NOT WRITE 10636 MAPLECHASE DR. BOCA RATON, FL 33498 IN THIS SPACE 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 1 am familiar with, and accept the obligations of registered agent. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS TITLE DP HAMDAN, AMJED NAME STREET ADDRESS 10636 MAPLECHASE DR. U00000091535 CITY-SI-ZIP BOCA RATON, FL 33498 03/18/04-80014-011 150.00 51525 MAME STREET ADDRESS 8154 - ST - ZIP HILE NAME STREET ADDRESS DO NOT WRITE Cify -ST-ZIP BRE IN THIS SPACE NAME STREET ADDRESS SITY - ST - ZIP THE NAME STREET ADDRESS CITY-ST-ZIP BRLE NAME STREET ADDRESS 12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florkda 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 v

**FILED**