


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P95000031277**

1. Entity Name  
**SERRA SERVICES CORPORATION**



Principal Place of Business      Mailing Address

**14612 SW 50 STREET**      **14612 SW 50 STREET**  
**MIAMI, FL 33175**      **MIAMI, FL 33175**

**DO NOT WRITE IN THIS SPACE**



01052006    No Chg-P    CR2E034 (11/05)

4. FEI Number: **65-0581108**      Applied For:  Not Applicable:

5. Certificate of Status Desired:       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SERRA, JORGE**  
**14612 SW 50 STREET**  
**MIAMI, FL 33175**

**DO NOT WRITE 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution:       \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SERRA, HILDA
STREET ADDRESS	14612 SW 50 STREET
CITY- ST- ZIP	MIAMI, FL 33175
TITLE	V
NAME	SERRA, JORGE
STREET ADDRESS	14612 SW 50 STREET
CITY- ST- ZIP	MIAMI, FL 33175
TITLE	V
NAME	SERRA, JORGE A JR
STREET ADDRESS	14612 SW 50 STREET
CITY- ST- ZIP	MIAMI, FL 33175
TITLE	S
NAME	QUINTERO, EILEEN
STREET ADDRESS	14612 SW 50 STREET
CITY- ST- ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE IN THIS SPACE**

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 04/26/06-80039-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Hilda Serra      Date: 4 10 06      Drytime Phone #: 305 229-17

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Drytime Phone #