2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 513543

Entity Name: RENCE INVESTMENTS INC.

Current Principal Place of Business:

C/O LANCASTER & REED, LLC 50 W MASHTA DR., STE 6 KEY BISCAYNE, FL 33149

Current Mailing Address:

C/O LANCASTER & REED, LLC 50 W MASHTA DR., STE 6 KEY BISCAYNE, FL 33149 US

FEI Number: 59-1710535

Name and Address of Current Registered Agent:

LANCASTER & REED, LLC LANCASTER & REED, LLC 50 W MASHTA DR., STE 6 KEY BISCAYNE, FL 33149 US

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.

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RICHARD A. REED, CPA			03/17/2018
Electronic Signature of Registered Agent			Date
tor Detail :			
P	Title	VP	
LOSADA, JOAQUIN	Name	FINA, JOAQUIN L	
210 SEAVIEW DRIVE	Address	210 SEAVIEW DRIVE	
KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149	
ST			
FINA, PAULA L			
210 SEAVIEW DRIVE			
KEY BISCAYNE FL 33149			
	Electronic Signature of Registered Agent tor Detail : P LOSADA, JOAQUIN 210 SEAVIEW DRIVE KEY BISCAYNE FL 33149 ST FINA, PAULA L 210 SEAVIEW DRIVE	Electronic Signature of Registered Agent tor Detail : P Title LOSADA, JOAQUIN Name 210 SEAVIEW DRIVE Address KEY BISCAYNE FL 33149 City-State-Zip: ST FINA, PAULA L 210 SEAVIEW DRIVE	Electronic Signature of Registered Agent tor Detail : P Title VP LOSADA, JOAQUIN Name FINA, JOAQUIN L 210 SEAVIEW DRIVE Address 210 SEAVIEW DRIVE KEY BISCAYNE FL 33149 City-State-Zip: KEY BISCAYNE FL 33149 ST FINA, PAULA L 210 SEAVIEW DRIVE

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOAQUIN LOSADA

PRESIDENT

03/17/2018

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date