

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046694

Entity Name: REGIONAL ONE, INC.**Current Principal Place of Business:**6750 NE 4TH COURT MIAMI, FL 33138
MIAMI, FL 33138**Current Mailing Address:**6750 NE 4TH COURT MIAMI, FL 33138
MIAMI, FL 33138 US**FEI Number:** 20-0872175**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO
Name	MAROM, DORON
Address	6750 NE 4TH COURT
City-State-Zip:	MIAMI FL 33138

Title	PRESIDENT
Name	GIBSON, HANK
Address	6750 NE 4TH COURT
City-State-Zip:	MIAMI FL 33138

Title	D
Name	ELLWEIN, STEPHEN
Address	2632 DUNES DRIVE PO BOX 733
City-State-Zip:	PIERRE SD 57501

Title	D
Name	SPARROW, DARWIN
Address	195 EMPIRE STREET
City-State-Zip:	HEADINGLEY MB R4H 1A6

Title	D
Name	GIBSON, HANK
Address	6750 NE 4TH COURT
City-State-Zip:	MIAMI FL 33138

Title	D
Name	SCHWANTES, JOSEPH
Address	6750 NE 4TH COURT
City-State-Zip:	MIAMI FL 33138

Title	S
Name	SPENCER, DIANNE
Address	22 MIREAULT LANE BOX 18 GRP 7 RR1
City-State-Zip:	DUFRESNE MB R0A 0J0

Title	DIRECTOR
Name	PETER, CARMELE
Address	40 WAYFARER'S HAVEN
City-State-Zip:	WINNIPEG MANITOBA R3X 1Z2

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: DIANNE SPENCER**SECRETARY****02/05/2018**

Electronic Signature of Signing Officer/Director Detail

Date