2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046694

Entity Name: REGIONAL ONE, INC.

Current Principal Place of Business:

6750 NE 4TH COURTMIAMI, FL 33138

MIAMI, FL 33138

Current Mailing Address:

6750 NE 4TH COURTMIAMI, 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

FILED Feb 14, 2019

Secretary of State

4027906430CC

Officer/Director Detail:

 Title
 CEO
 Title
 PRESIDENT

 Name
 MAROM, DORON
 Name
 GIBSON, HANK

 Address
 6750 NE 4TH COURT
 Address
 6750 NE 4TH COURT

City-State-Zip: MIAMI FL 33138 City-State-Zip: MIAMI FL 33138

Title D Title D

NameELLWEIN, STEPHENNameSPARROW, DARWINAddress2632 DUNES DRIVEAddress195 EMPIRE STREET

City-State-Zip: FORT PIERRE SD 57532 City-State-Zip: HEADINGLEY MB R4H 1A6

Title D Title D

Name GIBSON, HANK Name SCHWANTES, JOSEPH
Address 6750 NE 4TH COURT Address 6750 NE 4TH COURT

City-State-Zip: MIAMI FL 33138 City-State-Zip: MIAMI FL 33138

Title S Title DIRECTOR

Name SPENCER, DIANNE Name PETER, CARMELE

Address 22 MIREAULT LANE Address 40 WAYFARER'S HAVEN

City-State-Zip: DUFRESNE MANITOBA R5K 0L5 City-State-Zip: WINNIPEG MANITOBA R3X 1Z2

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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 02/14/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name STENNETT, STEVEN
Address 4455 W. KEARNEY

City-State-Zip: SPRINGFIELD MO 65803