

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000001952

**Entity Name:** CEMEX MANAGEMENT, INC.**Current Principal Place of Business:**1501 BELVEDERE ROAD  
WEST PALM BEACH, FL 33406**Current Mailing Address:**1501 BELVEDERE ROAD  
WEST PALM BEACH, FL 33406 US**FEI Number:** 76-0189755**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            PRESIDENT  
Name            RENIC, TRPIMIR  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            DIRECTOR, TREASURER  
Name            REITER LANDA, FERNANDO JOSE  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            ASST. SECRETARY  
Name            EGAN, MIKE F  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            TREASURER  
Name            SALINAS, FRANCISCO JAVIER JR.  
Address        1501 BELVEDERE RD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            DIRECTOR, VP  
Name            MARTINEZ SANS, GUILLERMO  
FRANCISCO  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            SECRETARY, DIRECTOR  
Name            HERNANDEZ MORALES, GUILLERMO  
FRANCISCO  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            ASST. SECRETARY  
Name            DELGADILLO GALVAN, RENE  
Address        1501 BELVEDERE ROAD  
City-State-Zip: WEST PALM BEACH FL 33406

Title            ASST. TREASURER  
Name            MARTINEZ QUINTANILLA, LUCIANO  
Address        1501 BELVEDERE RD  
City-State-Zip: WEST PALM BEACH FL 33406

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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: MIKE F. EGAN****ASST SECRETARY****03/25/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	ASST. TREASURER
Name	SANTA MARIA, SERGIO VAZQUEZ
Address	1501 BELVEDERE RD
City-State-Zip:	WEST PALM BEACH FL 33406