Sent By: ACCOUNTING OFFICES; 1 954 964 5309; Apr-30

FILED
May 22, 2002 8:00 am
Secretary of State
05-22-2002 90239 040 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000073185

1. Entity Name

R.E. INTERNATIONAL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
15841 Pines Blvd.
Suite, Apt. #, etc.
#314
City & State
Pembroke Pines, FL
Zip 33027 Country U.S.

3. Mailing Address
15841 Pines Blvd.
Suite, Apt. #, etc.
#314
City & State
Pembroke Pines, FL
Zip 33027 Country U.S.

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1126285 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Burton, Andre S.
Street Address (P.O. Box Number is Not Acceptable): 4310 Sheridan Street, #202
City: Hollywood FL Zip Code: 33021

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.

SIGNATURE _____ DATE

Signature required of named former Registered Agent and/or President

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DPT NAME STREET ADDRESS CITY-ST-ZIP	Flores, Ray 15841 Pines Blvd., #314 Pembroke Pines, FL 33027
TITLE DVS NAME STREET ADDRESS CITY-ST-ZIP	Flores, Luz 15841 Pines Blvd., #314 Pembroke Pines, FL 33027
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DO NOT WRITE IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or in an attachment with an address, with all other like empowered.

SIGNATURE: X _____ _____ X Luz Flores _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Typed or Printed Name