


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 8:00 am**  
**Secretary of State**

04-24-2008 90107 039 \*\*\*150.00

<b>DOCUMENT # P02000056640</b> 1. Entity Name REME CORP.	
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Principal Place of Business 7369 NW 34 ST. MIAMI, FL 33122 US	Mailing Address 8900 SW 102 COURT MIAMI, FL 33176 US
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04082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 04-3676542	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  ALVAREZ, VIVIAN D 1985 NW 88TH CT., SUITE 201 MIAMI, FL 33172	<b>DO NOT WRITE IN THIS SPACE</b>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERCHAN FONSECA, OLGA H CARRERA 32 NO. 91-18 BOGOTA, COLOMBIA SA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERCHAN FONSECA, ANA CECILIA CARRERA 32 NO. 91-18 BOGOTA, COLOMBIA SA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEON DUARTE, BRAULIO CARRERA 32 NO. 91-18 BOGOTA, COLOMBIA SA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with authority like empowered.

**SIGNATURE:**  **April 11<sup>th</sup>, 2008**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #