

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056640

FILED
Feb 18, 2009
Secretary of State

Entity Name: REME CORP.

Current Principal Place of Business:

7369 NW 34 ST.
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

8900 SW 102 COURT
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 04-3676542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, VIVIAN D
1985 NW 88TH CT., SUITE 201
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MERCHAN FONSECA, OLGA H
Address: CARRERA 32 NO. 91-18
City-St-Zip: BOGOTA, COLOMBIA SA,

Title: D () Delete
Name: MERCHAN FONSECA, ANA CECILIA
Address: CARRERA 32 NO. 91-18
City-St-Zip: BOGOTA, COLOMBIA SA,

Title: D () Delete
Name: LEON DUARTE, BRAULIO
Address: CARRERA 32 NO. 91-18
City-St-Zip: BOGOTA, COLOMBIA SA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BRAULIO LEON DUARTE

D

02/18/2009

Electronic Signature of Signing Officer or Director

_____ Date