

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020352

FILED
May 05, 2009
Secretary of State

Entity Name: REMAR INVESTMENT , CORP.

Current Principal Place of Business:

12350 SW 132ND CT.
102
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12350 SW 132ND CT.
102
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, BARBARA
12350 SW 132ND CT.
MIAMI, FL 33186 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIZ, MARCELINO
Address: 15248 SW 167TH ST.
City-St-Zip: MIAMI, FL 33187

Title: VP () Delete
Name: GARCIA, RENE H
Address: 13824 SW 68TH STREET
City-St-Zip: MIAMI, FL 33183

Title: SEC () Delete
Name: GARCIA, BARBARA
Address: 13824 SW 68TH STREET
City-St-Zip: MIAMI, FL 33183

Title: TRES () Delete
Name: PIZ, DAWN
Address: 15248 SW 167TH STREET
City-St-Zip: MIAMI, FL 33187

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:

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: MARCELINO PIZ

P

05/05/2009

Electronic Signature of Signing Officer or Director

Date