## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000084278

Entity Name: RELIANT VENTURES, INC.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8107 SW 203RD ST 8107 SW 203RD ST 8107 SW 203RD ST CUTLERBAY, FL 33189

Current Mailing Address: New Mailing Address:

8107 SW 203RD ST 8107 SW 203RD ST MIAMI, FL 33189 CUTLERBAY, FL 33189

FEI Number: 59-3499029 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREMER, JOHN B 810 SW 203RD ST 810 SW 203RD ST CUTLERBAY, FL 33189 US GREMER, JOHN B 810 SW 203RD ST CUTLERBAY, FL 33189 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: JOHN B GREMER 03/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition GREMER, JOHN B GREMER, JOHN B Name: Name: 8107 SW 203RD ST 8107 SW 203RD ST Address: Address: CUTLERBAY, FL 33189 US City-St-Zip: MIAMI, FL 33189 US City-St-Zip:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 SHAW, GEORGINA M
 Name:
 SHAW, GEORGINA M

 Address:
 8107 SW 203 STREET
 Address:
 8107 SW 203 STREET

 City-St-Zip:
 MIAMI, FL 33189 US
 City-St-Zip:
 CUTLERBAY, FL 33189 US

Title: SEC () Delete Title: () Change () Addition Name: KRIER, SANDRA Name:

 Name:
 KRIER, SANDRA
 Name:

 Address:
 2824WILDWOOD DR
 Address:

 City-St-Zip:
 CLEARWATER, FL
 33761 US
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 JOHN B GREMER,
 Name:
 JOHN B GREMER,

 Address:
 8107SW203ST
 Address:
 8107SW203ST

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 CUTLERBAY, FL 33189

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: JOHN B GREMER DIR 03/27/2009