2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 14, 2001 8:00 am Secretary of State **DOCUMENT # \$71425** 1. Entity Name REMAD CORPORATION 04-14-2001 90032 002 ***150.00 Principal Place of Business Mailing Address 1076 MEADOWLARK AVE 1076 MEADOWLARK AVE MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State NOT APPLICABLE Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent-Name DE MARTINI, MARTA C. Street Address (P.O. Box Number is Not Acceptable) 1076 MEADOWLARK AVE MIAMI SPRINGS FL 33166 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition Delete TITLE TITLE NAME NAME DE MARTINI, RENATO STREET ADDRESS STREET ADDRESS 1076 MEADOWLARK AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL ☐ Addition Change ☐ Delete TITLE TITLE VSD NAME NAME DE MARTINI, ELIO V. STREET ADDRESS STREET ADDRESS 1076 MEADOWLARK AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL ☐ Change ☐ Addition Delete TITLE NAME NAME DE MARTINI, MARTA C. STREET ADDRESS STREET ADDRESS 1076 MEADOWLARK AVE CITY-ST-ZIP CITY-ST-ZIF MIAMI SPRINGS FL Change ☐ Addition ☐ Detete TITLE TITLE NAME DE MARTINI, MARTA C. NAME STREET ADDRESS STREET ADDRESS 1076 MEADOWLARK AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI SPRINGS FL Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

MARTA DE MARTINI 04-10-01