2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State

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DOCUMENT # V34101 1. Entity Name RE-MAR MACHINE SHOP INC.									05-04-2006 9	90196 0	32 ***150.	.00
Principal Place of Business Mailing Address								1		_		
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1054 E. 27 STREET C/O LOPEZ ACCOUNTING						19		`	1000500	U		
HIALEAH, FL 33013 1800 W. 49 STREET, SUITE 20 HIALEAH, FL 33012									•			
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Principal Place of Business 3. Mailing Address												
2. Principal Place of Business				3. Mailing Address								
				Suite, Apt. #, etc.								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				04282006	Chg-P	CR2E	034 (11/05)	
City & State				City & State				4. FEI Numb	er		I IAr	plied For
Only a diale				0.1, 0.010					2048			ot Applicable
Zip - Country				Zip Coun								
		, ,		2.5		/	5. Certificate of		of Status Desired		\$8.75 Add Fee Require	ditional
6. Name and Address of Current I			urnant Basis	<u> </u>				7 Name		3		<u> </u>
	o. Name	e and Address of C	arrent vefit	staran Ağanı		7. Name and Address of New Registered Agent						
CORONE	DENE					Name						
CORONEL, RENE 453 E. 14TH ST.							Street Address (P.O. Box Number is Not Acceptable)					
		^			Oliegi A	uu. 655 (O. DOX NOTED	er is not Acceptab	Θ)			
HIALEAH, FL 33010										-		
i .						City				F	Zip Cod	ė
The above named entity submits this statement for the purpose of changing its registered office or register										•	_	
the obligat	named enu tions of regis	iy submits mis stater tered anent	nera for the j	purpose or changing its	register	ea onice or	register	ed agent, or bo	in, in the State of H	orida. 1 ar	n 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												
9. Election Campaign Financing											_	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund C						ncing		.00 May Be ed to Fees				
10. OFFICERS AN			0.4ND 0105					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
10.		OFFICER	S AND DIRE		11.			ADDITIONS,	CHANGES TO OF	ICERS AN	ID DIRECTORS	S IN 11
TITLE	PD			☐ Delete	TITLE		,				Change	Addition
NAME	CORONE	CORONEL, RENE NA				ΙE						
STREET ADDRESS	453 E. 14	453 E. 14 ST.					i					
CITY-ST-ZIP	HIALEAH, FL 33010					-ST-ZIP						
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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 attackment with an address, with all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: 1 Columb Corume Cobenato Cononel, Mrs. 4 10 6 (305) 691-424