I hereby 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 all other like empowered.

#### SIGNATURE: JOHN MONTOYA

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

03/19/2020

# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082918

Entity Name: REMAN CORP.

## **Current Principal Place of Business:**

5700 SW 133 RD. SUITE 8 MIAMI, FL 33183

#### **Current Mailing Address:**

5700 SW 133 RD. SUITE 8 MIAMI, FL 33183 US

## FEI Number: 55-0868932

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

MONTOYA, JOHN 5700 SW 133 RD. SUITE 8 MIAMI, FL 33183 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	E: JOHN MONTOYA			03/19/2020
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DP	Title	VP	
Name	MONTOYA, JOHN J	Name	MONTOYA, SANDRA P	
Address	5700 SW 133 RD. SUITE 8	Address	5700 SW 133 RD. SUITE 8	
City-State-Zip:	MIAMI FL 33183	City-State-Zip:	MIAMI FL 33183	

### Certificate of Status Desired: No

FILED Mar 19, 2020 Secretary of State 2459840898CC

Date