

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000097650

Entity Name: REMOTAID, INC.**Current Principal Place of Business:**677 NORTH WASHINGTON BLVD.
SUITE# 57
SARASOTA, FL 34236**Current Mailing Address:**P.O. BOX 50774
SARASOTA, FL 34232 US**FEI Number:** 39-2080063**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**U.S.A. LICENSE BROKERAGE AND AGENCY INTER
6132 41ST STREET EAST
BRADENTON, FL 34203 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	TATRAI, PETER
Address	677 NORTH WASHINGTON BLVD., SUITE# 57
City-State-Zip:	SARASOTA FL 34236

Title	VPD
Name	GERENCSE, ZSOLT DR.
Address	677 NORTH WASHINGTON BLVD., SUITE# 57
City-State-Zip:	SARASOTA FL 34236

Title	SD
Name	SZONYI, GYORGY DR.
Address	677 NORTH WASHINGTON BLVD., SUITE# 57
City-State-Zip:	SARASOTA FL 34236

Title	TD
Name	ROZSA, PETER
Address	677 NORTH WASHINGTON BLVD., SUITE# 57
City-State-Zip:	SARASOTA FL 34236

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: TATRAI PETER

PD

01/28/2014

Electronic Signature of Signing Officer/Director Detail

Date