

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001388

FILED
Feb 24, 2008
Secretary of State

Entity Name: CHILDREN BEYOND OUR BORDERS, INC.

Current Principal Place of Business:

353 N.W. BLVD.
GAINESVILLE, FL 32601

New Principal Place of Business:

353 NE BOULEVARD
GAINESVILLE, FL 32601

Current Mailing Address:

353 N.W. BLVD.
GAINESVILLE, FL 32601

New Mailing Address:

353 NE BOULEVARD
GAINESVILLE, FL 32601

FEI Number: 20-8370884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SANCHEZ, GILBERTO E. ESQ.
114 S. FREMONT AVE.
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCIA, LUIS F
Address: 353 N.W. BLVD.
City-St-Zip: GAINESVILLE, FL 32601

Title: VD () Delete
Name: SUAREZ, ANGELICA
Address: 2930 SW 23RD TERRACE. APT. 802
City-St-Zip: GAINESVILLE, FL 32608

Title: TD () Delete
Name: TRUJILLO, OSCAR
Address: 2930 SW 23RD TERRACE. APT. 802
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARCIA, LUIS F
Address: 353 NE BOULEVARD
City-St-Zip: GAINESVILLE, FL 32601

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS FELIPE GARCIA

PD

02/24/2008

Electronic Signature of Signing Officer or Director

Date