

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010516

FILED
Feb 04, 2011
Secretary of State

Entity Name: RELIN, INC.

Current Principal Place of Business:

1089 RED MAPLE WAY
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

1089 RED MAPLE WAY
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-3732845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONASSON, REYNIR
1089 RED MAPLE WAY
NEW SMYRNA BEACH, FL 32168 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
Name: JONASSON, REYNIR
Address: 1089 RED MAPLE WAY
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD
Name: REYNISSON, THORHALLUR H
Address: VIDIGRUND 53
City-St-Zip: 200 KIPAVOGUR, ICELAND, OC

Title: D
Name: BJARNASON, GUNNAR O
Address: EIKARASI 4
City-St-Zip: 210 GARDABAER, ICELAND, OC

Title: D
Name: REYNISSON, JONAS
Address: GLITVANGI 31
City-St-Zip: 220 HAFNAFJORDUR ICELAND,

Title: D
Name: JONASSON, ELIN
Address: 1089 RED MAPLE WAY
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: REYNIR JONASSON

PRES

02/04/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date