SIGNATURE: ANDREA ORTEGA Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

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. Electronic Signature of Registered Agent

Officer/Director Detail :

SIGNATURE:

Title	CEO, EXECUTIVE DIRECTOR	Title	OFFICER
Name	ORTEGA, ANDREA C	Name	CASTANO, GINA M
Address	2624 ROBERT TRENT JONES APT 625	Address	137 RANGELINE WOODS COVE
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	LONGWOOD FL 32750
Title Name Address City-State-Zip:	TREASURER MARIA, GRILLO C 45 CREEKSIDE LANE #147 MALVERN PA 19355	Title Name Address City-State-Zip:	PRESIDENT LIPKIN, JOHN 45 CREEKSIDE LANE #147 MALVERN PA 19355
Title Name Address City-State-Zip: Title Name Address	DIRECTOR GUERRERO, LISA A 491 RACQUET CLUB RD WESTON FL 33326 OFFICER ALVAREZ, DANIEL 3931 SW 146 AVENUE	Title Name Address City-State-Zip: Title Name Address City-State-Zip:	OFFICER DEVEREAUX , TARYN 4001 NEW HAMPSHIRE AVE NW
City-State-Zip:	MIRAMAR FL 33027	Continues of	on page 2

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 617, Florida Statutes; and that my name appears

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0700001388

Entity Name: CHILDREN BEYOND OUR BORDERS, INC.

Current Principal Place of Business:

2624 ROBERT TRENT JONES APT 625 ORLANDO, FL 32835

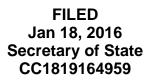
Current Mailing Address:

P.O. BOX 568411 ORLANDO, FL 32856

FEI Number: 20-8370884

Name and Address of Current Registered Agent:

ORTEGA, ANDREA 2624 ROBERT TRENT JONES APT 625 ORLANDO, FL 32835 US



Certificate of Status Desired: No

Date

01/18/2016 Date

EXECUTIVE DIRECTOR

Officer/Director Detail Continued :

Title	OFFICER	Title	OFFICER
Name	MONTOYA-WILLIAMS, DIANA	Name	WILLIAMS, BRENDAN
Address	1245 SW 9TH ROAD UNIT 301	Address	1245 SW 9TH ROAD UNIT 301
City-State-Zip:	GAINESVILLE FL 32601	City-State-Zip:	GAINESVILLE FL 32601
Title	OFFICER	Title	OFFICER
Name	TORRES, NATALIA	Name	HOYLE, ALLISON
Address	2516 N KEDZIE BLVD APT 3E	Address	2196 COVENTRY RD
City-State-Zip:	CHICAGO IL 60647	City-State-Zip:	UPPER ARLINGTON OH 43221
Title	OFFICER	Title	OFFICER
Name	LEYVA, MARCUS	Name	CORREA, KEVIN
Address	108 EAST 4TH STREET APT. 12	Address	253 NE 2ND ST APT 2102
City-State-Zip:	NEW YORK NY 10003	City-State-Zip:	MIAMI FL 33132