2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G84022

Entity Name: REBEL REFRACTORIES, INC.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1000 HOOVER ROAD

WINTER HAVEN, FL 33884 US

Current Mailing Address: New Mailing Address:

1000 HOOVER ROAD

WINTER HAVEN, FL 33884 US

FEI Number: 59-2371751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BEALE, DAN L BEALE, DAN L

6618 WINTER GARDEN ROAD 4354 DUCK DOWN LANE

WINTER HAVEN, FL 33884 US WINTER HAVEN, FL 33884 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: 01/11/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: BEALE, DAN L., Name: BEALE, DAN L.,

Address: 6618 WINTER GARDENS RD. Address: 4354 DUCK DOWN LANE
City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: WINTER HAVEN, FL 33884

Title: VP () Delete Title: () Change () Addition

 Name:
 BEALE, ROBERT D,
 Name:

 Address:
 3726 WHITE OAK CT.
 Address:

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 ZINK, LAURA L
 Name:
 ZINK, LAURA L

 Address:
 404 TENNYSON RD
 Address:
 414 SMILEY COURT

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:
 WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA LEE ZINK SECY 01/11/2007