

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 29, 2011
Secretary of State

DOCUMENT# N07000005102

Entity Name: CHILDREN ACROSS BORDERS, INC.**Current Principal Place of Business:**830 S. WILLOW AVENUE
TAMPA, FL 33606**New Principal Place of Business:****Current Mailing Address:**830 S. WILLOW AVENUE
TAMPA, FL 33606**New Mailing Address:****FEI Number:** 26-2601630**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SETH, SHARMILA
830 S. WILLOW AVENUE
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: DP
Name: SETH, SHARMILA
Address: 830 S. WILLOW AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D
Name: INNGANTI, SHEELA M
Address: 16 HEADLAND DRIVE
City-St-Zip: RANCHO PALOS VERDES, CA 90275

Title: DT
Name: LEE, SU
Address: 718 S. ORLEANS AVENUE
City-St-Zip: TAMPA, FL 33606

Title: D
Name: DELUCA, HELENE
Address: 249 E. 48TH STREET #10 H
City-St-Zip: NEW YORK, NY 10017

Title: D
Name: SETH, VIVEK
Address: 830 S. WILLOW AVENUE
City-St-Zip: TAMPA, FL 33606

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

SIGNATURE: SHARMILA SETH

P

08/29/2011

Electronic Signature of Signing Officer or Director

Date