

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003060

FILED
Jan 04, 2008
Secretary of State

Entity Name: REBIRTH FOUNDATION INC.

Current Principal Place of Business:

2441 SW 142 PLACE
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

2441 SW 142 PLACE
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0758209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVA, ESTHER
2441 SW 142 PLACE
MIAMI, FL 33175 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: ALVA, ESTHER
Address: 2441 SW 142 PLACE
City-St-Zip: MIAMI, FL 33175

Title: TD () Delete
Name: FUENTES, SANTOS
Address: 237 SW 13 ST. APT. #209
City-St-Zip: MIAMI, FL 33130

Title: VD () Delete
Name: GONZALEZ, EVELIO
Address: 2500 SW 113 PL
City-St-Zip: MIAMI, FL 33165

Title: SD () Delete
Name: RODRIGUEZ, EVIE
Address: 140 PINEON LN
City-St-Zip: ALPHARETTA, GA 30005

Title: AT () Delete
Name: GRIFFIN, AARON
Address: 6701 SW 64TH AVENUE
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALVA, ESTHER PD
Address: 2441 SW 142 PLACE
City-St-Zip: MIAMI, FL 33175

Title: TD (X) Change () Addition
Name: FUENTES, SANTOS TD
Address: 237 SW 13 ST. APT. #209
City-St-Zip: MIAMI, FL 33130

Title: VD (X) Change () Addition
Name: PINTO, SANDRA VD
Address: 237 SW 13TH ST APT# 209
City-St-Zip: MIAMI, FL 33130

Title: SD (X) Change () Addition
Name: GRIFFIN, AARON SD
Address: 6701 SW 64TH AVE
City-St-Zip: MIAMI, FL 33143

Title: D (X) Change () Addition
Name: BALAREZO, OSCAR D
Address: 404 SW 6TH ST APY # 1
City-St-Zip: MIAMI, FL 33130

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: ESTHER ALVA

PD

01/04/2008

Electronic Signature of Signing Officer or Director

Date