

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111346

FILED
Mar 14, 2012
Secretary of State

Entity Name: CB RISING, INC.

Current Principal Place of Business:

4019 SW PORT ST. LUCIE BLVD
UNIT 1
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

4019 SW PORT ST. LUCIE BLVD
UNIT 1
PORT ST. LUCIE, FL 34953

New Mailing Address:

FEI Number: 04-3822805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CISCHKE, SUSAN M
4019 SW PORT ST LUCIE BLVD
UNIT 1
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

SHARKEY, WILLIAM C III
4019 SW PORT ST LUCIE BLVD
UNIT 1
PORT ST LUCIE, FL 34953 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: WILLIAM SHARKEY

03/14/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COO
Name: CISCHKE, CHRISTOPHER R
Address: 4019 SW PORT ST LUCIE BLVD UNIT 1
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: CFO
Name: SHARKEY, WILLIAM C III
Address: 4019 SW PORT ST LUCIE BLVD UNIT 1
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: CEO
Name: CISCHKE, SUSAN M
Address: 4019 SW PORT ST LUCIE BLVD UNIT 1
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: WILLIAM SHARKEY

CFO

03/14/2012

Electronic Signature of Signing Officer or Director

Date