

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114881

Entity Name: REBELMIX, INC.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

18331 PINES BLVD.
#278
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

18331 PINES BLVD.
#278
PEMBROKE PINES, FL 33029

New Mailing Address:

PO BOX 025580
#KIN 7022
MIAMI, FL 331025580

FEI Number: 20-3319153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNCYK, IRVING
4310 SHERIDAN STREET
#202
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

COLON, YVETTE L ESQ.
3111 STIRLING ROAD
FT. LAUDERDALE, FL 333126525 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: YVETTE LISA COLON

04/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDMONDS, CHRISTOPHER
Address: 18331 PINES BLVD. #278
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP () Delete
Name: TAPPER, HENRY
Address: P.O. BOX 821444
City-St-Zip: PEMBROKE PINES, FL 33082

Title: VP () Delete
Name: SCOTT, SEAN
Address: 7800 SW 57TH AVE
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EDMONDS, CHRISTOPHER A
Address: PO BOX 025580 #KIN 7022
City-St-Zip: MIAMI, FL 331025580

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER ALBIN EDMONDS

P

04/14/2008

Electronic Signature of Signing Officer or Director

Date