

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000037085

Entity Name: RE-BORN CORP.

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5480 W STATE ROAD 80  
FORT DENAUD, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

5480 W STATE ROAD 80  
FORT DENAUD, FL 33935

**New Mailing Address:**

PO BOX 2781  
LABELLE, FL 33975

FEI Number: 26-4783117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TREVINO, DORA N  
3016 ARNET LN  
PORT LABELLE, FL 33935 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: P  
Name: RIOS, JOSUE  
Address: 5480 W STATE ROAD 80  
City-St-Zip: FORT DENAUD, FL 33935

Title: V  
Name: RIOS, CARMEN  
Address: 5480 W STATE ROAD 80  
City-St-Zip: FORT DENAUD, FL 33935

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: JOSUE D. RIOS

PRES

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date