

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000016916

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** REBEL RECOVERY & TRANSPORTATION, INC.

**Current Principal Place of Business:**

18416 15TH AVE  
ORLANDO, FL 32833 US

**New Principal Place of Business:**

10195 BOGGY CREEK RD  
ORLANDO, FL 32824 US

**Current Mailing Address:**

18416 15TH AVE  
ORLANDO, FL 32833 US

**New Mailing Address:**

P.O. BOX 181607  
CASSELBERRY, FL 32718

**FEI Number:** 27-4969484

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEBU, KAREN OWNER  
18416 15TH AVE  
ORLANDO, FL 32833 US

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

LEBU, KAREN OWNER  
710 SEMINOLA BLVD  
CASSELBERRY, FL 32707 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: KAREN LEBU

04/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LEBU, KAREN OWNER  
Address: P.O. BOX 181607  
City-St-Zip: CASSELBERRY, FL 32718 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: KAREN LEBU

OWNE

04/16/2012

Electronic Signature of Signing Officer or Director

Date