2008 FOR PROFIT CORPORATION

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ANNUAL REPORT				Jan 28, 2008 08:00		
DOCU	MENT # H65768				Secretary of Sta	
1. Entity Nan	ne ES BY RB, INC.				~ · · · · · · · · · · · · · · · · · · ·	
OLIVIO.						
	ce of Business	Mailing Address		1		
8685 70TH VERO BEACH	AVE H, FL 32967 US	8685 70TH AVENUE Vero Beach, FL 32967				
*****	11, 16 02001 33	FERO DERIVITATE GEOD.			a milay laki mjari mjari mkali mkali mjali mkalimah in jami	
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· .	O NOT WRITE	IN THIS SPA	CF	01212008 No Chg	·	
. ,			OL.	4. FEI Number 59-2559783	Applied For Not Applicable	
4, -				5. Certificate of Status De	sired \$8.75 Additional	
a /5, ml 54	6. Name and Address of Current R	egistered Agent			Tee required	
BASS, CIN	NDY L.			PONOT		
8685 70TH	8685 70TH AVENUE			· DO NOT	of it is a contract to the contract of the con	
VERU BL	ACH, FL 32967			IN THIS	SPACE, SPACE	
8. The above	e named entity submits this statement for titions of registered agent.	the purpose of changing its register	red office or register	ed agent, or both, in the Stat	e of Florida. I am familiar with, and accept	
_	- ·					
SIGNATURE.	Signature, typed or printed name of registered agent an	d title il applicable. (NOTE: Registeri	ed Agent signature required	when reinstating)	DATE	
	.E NOWIII FEE IS \$150.00 lay 1, 2008 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.	~ _ +•.	00 May Be ed to Fees		
10.	OFFICERS AND D	IRECTORS	14 Sept 14 L	75人。134466年	Prophing with the contract of	
TITLE NAME	PD BASS, ROY C.					
STREET ADDRESS	8685 70TH STREET		100			
CITY-ST-ZIP	VERO BEACH, FL		_			
NAME	BASS, CINDY L.			ຸ້ນໃດຢູ່ ຄາ /ວິດ /		
STREET ADDRESS CITY-ST-ZIP	8685 70TH STREET VERO BEACH, FL		*	nak any	08-80034-001 150.00	
TITLE			1			
NAME STREET ADDRESS						
CITY-ST-ZIP				DO NOT	WRITE	
TITLE NAME				IN THIS	SPACE	
STREET ADDRESS						
CITY-ST-ZIP						
TITLE NAME						
STREET ADDRESS CITY-ST-ZIP						
TITLE	<u> </u>			The same of the sa	The state of the s	
NAME STREET ADDRESS	. "	-				

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED ON

772-589-0684