## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

**DOCUMENT # 150073** 

1. Entity Namé RUEBEL INVESTMENTS, INC.



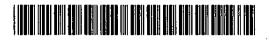
**FILED** Mar 31, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

204 37TH AVE N #358 SAINT PETERSBURG, FL 33704

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DO NOT	WRITE	IN THIS	SPACE
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03272008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0568213 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, BRELON 2401 FIFTH AVE NORTH SAINT PETERSBURG, FL 33713

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the plans of registered agent.	ourpose of changing its rec	gistered office or re	egistered agent, or b	oth, in the State of Flor	ida. I am famili	ar with, and acc	ept
	and the state of t				•			
SIGNATURE_	Signature, typed or printed name of registered agent and title	if emplicable (NOTE: Re	pointered Acent elementics	required when reinstating)		DATE		
, , ,	orgination types or printed that is a registered agent and allo	1 applicable. (1401C. No	Mistoren y Agust adirectore	reduced wilett telletating)	· · ·	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign     Trust Fund Contribu		\$5.00 May Be Added to Fees	U000008 04/10/08-80	74521 0119-021	150.00	
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD RUEBEL JR, CHARLES G 721 NW MEADOWOOD CIR MCMINNVILLE, OR 99128						·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RUEBEL, ROBERTA B 721 NW MEADOWOWOOD CIR MCMINNVILLE, OR 97128			·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
NAME STREET ADDRESS CITY-ST-ZIP	N. DONG AND METHOD IN CO.	in the second second					, , , , , ,	٠

12. I hereby certify that the information supplied with this filing 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 like empowered.

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