

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J69022

Entity Name: RBFP INC.

FILED
May 26, 2009
Secretary of State**Current Principal Place of Business:**7710 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653**New Principal Place of Business:****Current Mailing Address:**7710 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653**New Mailing Address:**

FEI Number: 59-2797978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:FAMKAR, MAH MOOD
7710 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653 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: PSD () Delete
Name: FAMKAR, MAH MOOD
Address: 18117 EMERALD BAY ST.
City-St-Zip: TAMPA, FL 33647Title: V () Delete
Name: FRONT, HENRY L
Address: 4356 S KIRKMAN RD APT # 509
City-St-Zip: ORLANDO, FL 32811**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP (X) Change () Addition
Name: BOUCHER, GARY A
Address: P.O BOX 432
City-St-Zip: OZONA, FL 34660

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: FAMKAR MAHMOOD

PSD

05/26/2009

Electronic Signature of Signing Officer or Director

Date