## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION ANNUAL REPORT

Katherine Harris

Mailing Address

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # K87002** 1. Corporation Name

RB INVESTMENT GROUP, INC.

1999

Principal Place of Business

99 JAN 14 PM 2:50 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

% Michael Krul   200 E. Broward Blvd. 17th Floor   Ft Lauderdale Fl 33301   US	% MICHAEL KRUL 200 E. BROWARD BLVD. 17TH FLC FT LAUDERDALE FL 33301 US	XOR	DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE			
-		. * 5==	05/10/1989				
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For			
21	26		65-0219155	Not Applicable			
Suite, Apt, #, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country 25	Zip Col   29   30	intry	This corporation owes the current year Int     Personal Property Tax.	angible ∐Yes ∐No			
Name and Address of Current Registered Agent     10, Name and Address of New Registered Agent							
KRUL, MICHAEL H.		81 Name					
200 E. BROWARD BLVD.		<u> </u>	dress (P.O. Box Number is Not Acceptable)				
FT. LAUDERDALE FL 33301		83					
*··		84 City	FL.	85 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							

SIGNATURE Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 100002747781 -01/20/99--01061--006 DELETE TITLE PD 1.1 TITLE SCHUSTER, CARL 12 NAME NAME 200 E BROWARD BLVD. 1.3 STREET ADDRESS STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 FT LAUDERDALE FL 1.4 CITY-ST-ZIF CITY-ST-ZII DELETE Change ☐ Addition mr.e VSD 2.1 TITLE KRUL, MICHAEL H. 2.2 NAME 200 E BROWARD BLVD. STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change 3.1 TITLE TITLE LANE, DAVID 3.2 NAME NAME 200 E BROWARD BLVD STREET ADORESS 3.3 STREET ADDRESS FT. LAUDERDALE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4.2 NAME STREET ADDRES 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ DELETE ☐ Change ☐ Addition TITLE NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

CR2E034 (11/98)