FILED
Aug 14, 2001 8:00 am
Secretary of State

04-19-2001 90324 006 ****61.25
07-10-2001 90003 013 *****8.75

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003201

1. Entity Name

RB WORLD MINISTRIES INC.

Principal Place of Business	Mailing Address
P.O. BOX 161813 MIAMI FL 33116-1813	P.O. BOX 161813 MIAMI FL 33116-1813

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
15853 S.W. 71 ST.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State MIAMI, FL	City & State
Zip 33193 Country U.S.	Zip Country

4. FEI Number 65-1020872 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MULLER, RODOLFO B 9031 SW 122 AVE. APT. 209 MIAMI FL 33186	Name RODOLFO BEUTTENMULLER Street Address 15853 S.W. 71 ST. City MIAMI FL Zip Code 33193

8. 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 RODOLFO BEUTTENMULLER [signature] 04-13-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RODOLFO BEUTTENMULLER 15853 S.W. 71 ST. MIAMI, FL 33193 PRES. ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT DAVID BONILLA 9725 S.W. 85 ST. MIAMI, FL 33173 (Dir.) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY GIDALTE G. ALENCAR 500 LOCK RD. APTO 11 DEERFIELD BEACH, FL 33442 (Dir.) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER Luceno Higa 4837 SW 136 PL Miami, FL 33175 (Dir.) ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

SIGNATURE: [signature] President 04-13-01 305-505-4517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #