

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 08, 2007 08:00 AM
Secretary of State

DOCUMENT # N00000003201

1. Entity Name
RB WORLD MINISTRIES INC.



Principal Place of Business
15853 SW 71 ST
MIAMI, FL 33193

Mailing Address
P.O. BOX 161813
MIAMI, FL 33116-1813



06032007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1020872	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BEUTTENMULLER, RODOLFO
15853 S W 71 ST
MIAMI, FL 33193

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee Is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BEUTTENMULLER, RODOLFO
STREET ADDRESS	13213 S.W. 85 ST. RD.
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	VPD
NAME	BEUTTENMULLER, FANNY A
STREET ADDRESS	13213 S.W. 85 ST. RD.
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	SD
NAME	ALENCAR, GIDALTE G
STREET ADDRESS	500 LOCK RD APT 11
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	D
NAME	CARRION, PEDRO
STREET ADDRESS	13755 SW 169 TERR
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	DT
NAME	BONILLA, DAVID
STREET ADDRESS	9725 S.W. 85 ST.
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000771667
08/08/07-80002-002 70.00

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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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08-03-07
Date Daytime Phone #