2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # N0000003201 I. Entity Name RB WORLD MINISTRIES INC. | | | | | | ED AHII: 17 | | |
|--|--|--|--|--|--|---|--|--------------------------|
| rincipal Place | | Mailing Address | | | SECRETAR | Y OF STATE | | |
| 3030 O W-T | | P.O. BOX 161813 MIAMI FL 33116-1813 | | | SECRETARY OF STATE TALLAHASSEE. FLORIDA | | | |
| 2. Principal Place of Business 13 13 SW 85 87 (1) 3. Mailing Address | | | | _ | | | | ı |
| Suite, Apt. # | , etc. | Suite, Apt. #, etc. | | | | HECK HERE IF MAKING | CHANGES Applied Fo | |
| City & State | 17 33/83 | City & State | | | Not Ap | | Not Applic | |
| Zip | Country | Zip | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent | | | |
| 6. Name and Address of Current Registered Agent | | | | Name | | | | |
| BEUTTENMULLER, RODOLFO 15853 S W 71 ST | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| MIAMI FL | | | City | | | FL | Zip Code | |
| | Signature, typed or printed name of registered agent | | E: Registered Agent signatu | re required | st.00 May Be | | k Payable to | |
| | | | 11. | | | S TO OFFICERS AND D | | |
| NAME STREET ADDRESS | P BEUTTENMULLER, RODOLFO 15853 S W 71 ST | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P.Z | 3 EYTTENMIN | | Change □ Ad | ddition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Miami Fl 33193 VPD Bonilla, David 9725 S W 85 ST Miami Fl 33173 | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | BELL 137 | TENMU 13 SWE | Um Ros | hange Ac | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD ALENRAR, GIDALTE G 500 LOCK RD APT 11 DEERFIELD BEACH FL 33442 | ☐ Celete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | _ | 3 00 0 02/11 0 3 | 7 1 2 3 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Dec | ddition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD HIGA, LUCERO 4837 S W 136 PL MIAMI FL 33175 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | ddition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 130. | MILLA, DAVI 25 SWBS AMI-FL3 | ot 3173 | <u></u> | Addition |
| TITLE NAME STREET ADDRESS | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 300 02/11/03 | 0123119 01044004 | 553 **61.25 | Additio |
| 40 Lharaby | certify that the information supplied wid on this report or supplemental report proration or the receiver or trustee emit, or on an attachment with an address | h this filing does not qualify to is true and accurate and that however to execute this report and other like empowered to execute this report and other like empowered. | t as required by Ch | ated in S have the apter 6 | Section 119.07(3)(i), Flo e same legal effect as i 17, Florida Statutes; an | orida Statutes. I further of finade under oath; that dishat my name appears | ertify that the informa I am an officer or dire s in Block 10 or Block | ation ector < 11 i |