

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000110198

1. Entity Name
RBH GROUP, INC.



Principal Place of Business
10651 SW 14TH CT.
FT. LAUDERDALE, FL 33324

Mailing Address
10651 SW 14TH CT.
FT. LAUDERDALE, FL 33324



04232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
48-1279335

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLMENARES, RAYMOND
10651 SW 14TH CT.
FT. LAUDERDALE, FL 33324

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IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

000000145877
05/03/04-80047-012 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MCNAB, BRIAN W 10651 SW 14TH CT. FT. LAUDERDALE, FL 33324
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S OLORTEGUI, HUGO 10651 SW 14TH CT. FT. LAUDERDALE, FL 33324
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T COLMENARES, RAYMOND 10651 SW 14TH CT. FT. LAUDERDALE, FL 33324
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

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 607, 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: *Brian W. McNab* *PRESIDENT*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/04 (954) 336-0655
Date Daytime Phone #