

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10666

Entity Name: R.B.I. HOLDING COMPANY

FILED
Apr 05, 2007
Secretary of State

Current Principal Place of Business:

15500 ROOSEVELT BLVD
SUITE 301
CLEARWATER, FL 337603410 US

Current Mailing Address:

15500 ROOSEVELT BLVD
SUITE 301
CLEARWATER, FL 337603410 US

New Principal Place of Business:

4592 ULMERTON RD
SUITE100
CLEARWATER, FL 33762 US

New Mailing Address:

4592 ULMERTON RD
SUITE 100
CLEARWATER, FL 33762 US

FEI Number: 58-0708355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, LESLIE A
15500 ROOSEVELT BLVD STE 301
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

RUBIN, LESLIE A
4592 ULMERTON RD
SUITE 100
CLEARWATER, FL 33762 US

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: LESLIE A RUBIN

04/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: KAHN, MICHAEL
Address: 2125 MELLER LANE SW
City-St-Zip: MARIETTA, GA 30064

Title: VSD () Delete
Name: RUBIN, LESLIE
Address: 15500 ROOSEVELT BLVD., STE. 301
City-St-Zip: CLEARWATER, FL 33760

Title: COBD () Delete
Name: RUBIN, PEGGY M
Address: 6140 RIVER CHASE CIR. NW
City-St-Zip: ATLANTA, GA 30328

Title: CFOD () Delete
Name: RUBIN, DONNA
Address: 2945 COLES WAY
City-St-Zip: ATLANTA, GA 30350

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VSD (X) Change () Addition
Name: RUBIN, LESLIE
Address: 4592 ULMERTON RD SUITE 100
City-St-Zip: CLEARWATER, FL 33762

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL KAHN

CDP

04/05/2007

Electronic Signature of Signing Officer or Director

Date