## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10666

City-St-Zip:

ATLANTA, GA 30350

Entity Name: R.B.I. HOLDING COMPANY

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4592 ULMERTON RD SUITE100 CLEARWATER, FL 33762 US **New Mailing Address: Current 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: 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CDP ( ) Delete Title: () Change () Addition KAHN, MICHAEL Name: Name: 2125 MELLER LANE SW Address: Address: City-St-Zip: MARIETTA, GA 30064 City-St-Zip: Title: VSD Title: () Delete () Change () Addition Name: RUBIN, LESLIE Name: 4592 ULMERTON RD SUITE 100 Address: Address: CLEARWATER, FL 33762 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: COBD () Change () Addition RUBIN, PEGGY M Name: Name: 6140 RIVER CHASE CIR. NW Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: CFOD ( ) Delete Title: () Change () Addition RUBIN, DONNA Name: Name: Address: 2945 COLES WAY Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: LESLIE A. RUBIN VSD 04/27/2009