

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000011075

1. Entity Name  
RBF INVESTMENTS, INC.



Principal Place of Business  
C/O RENEE B. FINK  
10 EDGEWATER DR., # 16C  
CORAL GABLES, FL 33133 US

Mailing Address  
C/O RENEE B. FINK  
10 EDGEWATER DR., # 16C  
CORAL GABLES, FL 33133 US



03182005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0571582

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

M & W AGENTS, INC.  
2101 CORPORATE BOULEVARD  
SUITE 108  
BOCA RATON, FL 33431

**DO NOT WRITE  
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 reinstalling)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	FINK, RENEE
STREET ADDRESS	3651 NW 81 STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	VD
NAME	FINK, BRIAN
STREET ADDRESS	3651 NW 81 STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	STD
NAME	FINK, JEFFREY
STREET ADDRESS	9200 S DADELAND BLVD STE 214
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Renée B. Fink* RENEE B. FINK 4/22/05 305 668-0561