


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000011075</b> 1. Entity Name RBF INVESTMENTS, INC.	
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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
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<b>DO NOT WRITE IN THIS SPACE</b>
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01152007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0571582	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  FINK, RENEE B 10 EDGEWATER DR #16C CORAL GABLES, FL 33133
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FINK, RENEE 3651 NW 81 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FINK, BRIAN 3651 NW 81 STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FINK, JEFFREY 9200 S DADELAND BLVD STE 214 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000609218  
02/01/07-80042-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or without other like empowers.

SIGNATURE: Renee B. Fink 1/24/07 305.668.0561  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #