

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90046 050 ***150.00

DOCUMENT # P95000078249

1. Entity Name

MB & RB, INC.



Principal Place of Business

5428 SILVER CHRM TERR
WESLEY CHAPEL FL 33544

Mailing Address

5428 SILVER CHRM TERR
WESLEY CHAPEL FL 33544

2. Principal Place of Business

17351 Emerald Chase Dr

Suite, Apt. #, etc.

N/A

3. Mailing Address

17351 Emerald Chase Dr

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Tampa FL

Zip

33647

Country

USA

Zip

33647

Country

USA

4. FEI Number

59-3406349

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DONALD L. MCBATH, JR.
13304 WINDING OAK CT.
TAMPA FL 33612

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME BELHASSAN, MEHDI
STREET ADDRESS 5428 SILVER CHARM TERR
CITY-ST-ZIP WESLEY CHAPEL FL 33544 ☐ Delete

TITLE T
NAME BELHASSAN, RHONDA
STREET ADDRESS 5428 SILVER CHARM TERR
CITY-ST-ZIP WESLEY CHAPEL FL 33544 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Belhassan, mehdi
STREET ADDRESS 17351 Emerald Chase Dr.
CITY-ST-ZIP Tampa FL 33647 ☒ Change ☐ Addition

TITLE T
NAME Belhassan, Rhonda
STREET ADDRESS 17351 Emerald Chase Dr
CITY-ST-ZIP Tampa FL 33647 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Mehdi Belhassan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/04 813-541-4504

Date

Daytime Phone #