

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059472

Entity Name: RBF CARE MANAGEMENT, INC.

FILED  
Apr 07, 2008  
Secretary of State

## Current Principal Place of Business:

5929 NW 74TH ST  
POMPANO BEACH, FL 33067

## New Principal Place of Business:

## Current Mailing Address:

5929 NW 74TH ST  
POMPANO BEACH, FL 33067

## New Mailing Address:

FEI Number: 65-0929772

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HORN, NANCY  
5929 NW 74TH ST  
POMPANO BEACH, FL 33067 US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: HORN, NANCY  
Address: 5929 NW 74TH ST  
City-St-Zip: POMPANO BEACH, FL 33067

Title: PST ( ) Delete  
Name: HORN, NANCY  
Address: 5929 NW 74TH ST  
City-St-Zip: POMPANO BEACH, FL 33067

Title: VAS ( ) Delete  
Name: FINEBERG, LIBO B  
Address: 3500 GATEWAY DR., STE. 201  
City-St-Zip: POMPANO BEACH, FL 33069

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: NANCY HORN

D

04/07/2008

Electronic Signature of Signing Officer or Director

Date