

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 476007 (0)

1. Corporation Name
RAINBOW MILLS DYEING & FINISHING, INC.



Principal Place of Business: **5100 NW 165TH ST MIAMI FL 33014-3303**
Mailing Address: **1875 MCCARTER HWY NEWARK NJ 07104 US**

3. Date Incorporated or Qualified: **05/09/1975**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-1592469**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
Suite, Apt. #, etc.
City & State
Zip Country

9. Name and Address of Current Registered Agent

**CORPORATE CREATIONS ENTERPRISES INC.
4521 PGA BLVD.
SUITE 211
PALM BEACH FL 33418**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Numbers Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature (typed or printed name of member, agent and officer if applicable)

(NOTE: Registered Agent Signature is printed when possible)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P SAFER, ALBERT <input type="checkbox"/> DELETE	1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	12 NAME	
STREET ADDRESS	NEWARK NJ	13 STREET ADDRESS	
CITY-STATE-ZIP		14 CITY-STATE-ZIP	
TITLE	V HERMANN, STEVEN <input type="checkbox"/> DELETE	2 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	22 NAME	
STREET ADDRESS	NEWARK NJ	23 STREET ADDRESS	
CITY-STATE-ZIP		24 CITY-STATE-ZIP	
TITLE	V NEUER, PHILIP <input type="checkbox"/> DELETE	3 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	32 NAME	
STREET ADDRESS	NEWARK NJ	33 STREET ADDRESS	
CITY-STATE-ZIP		34 CITY-STATE-ZIP	
TITLE	T HEMMING, AL <input type="checkbox"/> DELETE	4 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	42 NAME	
STREET ADDRESS	NEWARK NJ	43 STREET ADDRESS	
CITY-STATE-ZIP		44 CITY-STATE-ZIP	
TITLE	S SAFER, SYLVIA <input type="checkbox"/> DELETE	5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	52 NAME	
STREET ADDRESS	NEWARK NJ	53 STREET ADDRESS	
CITY-STATE-ZIP		54 CITY-STATE-ZIP	
TITLE	S NEURER, PHILIP D. <input type="checkbox"/> DELETE	6 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1875 MCCARTER HIGHWAY	62 NAME	
STREET ADDRESS	NEWARK NJ	63 STREET ADDRESS	
CITY-STATE-ZIP		64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (change) or in an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-26-96
201
482-2228
DATE TIME PHONE #

CR2E034 (12/95)