

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 14, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000001608

1. Entity Name

RAINBOW OVERSEAS INVESTMENTS, INC.



Principal Place of Business

2424 N. FEDERAL HIGHWAY, SUITE 101
BOCA RATON FL 33431

Mailing Address

2424 N. FEDERAL HIGHWAY, SUITE 101
BOCA RATON FL 33431

2. Principal Place of Business

Suite, Apt #, etc.

3. Mailing Address

Suite, Apt #, etc.



1st MOORE

CR2E034 (10/04)

City & State

City & State

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHNEIDER, JEFFREY A
SCHNEIDER FINANCIAL SERVICES
1402 ROYAL PALM BEACH BLVD, #700-110
ROYAL PALM BEACH FL 33411-1569

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 terminating)

DATE

PRESIDENT

Feb 2, 05

FILE NOW! FEE IS \$150.00

After May 1, 2005 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CPST ☐ Delete
NAME GENOVESE, ROBERT D
STREET ADDRESS 2424 N. FEDERAL HIGHWAY, SUITE 101
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 1100000227856
CITY-ST-ZIP 02/14/05-80015-010 150.00

TITLE D ☐ Delete
NAME MCDONALD, MARIE
STREET ADDRESS P.O. BOX N-10206
CITY-ST-ZIP NASSAU BAHAMAS

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

TITLE D ☐ Delete
NAME HANNA, PACHRIDEE
STREET ADDRESS P.O. BOX N-10206
CITY-ST-ZIP NASSAU BAHAMAS

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

TITLE D ☐ Delete
NAME SCHNEIDER, JEFFREY A
STREET ADDRESS 1402 ROYAL PALM BEACH BLVD, #700-110
CITY-ST-ZIP ROYAL PALM BEACH FL 33411

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: ROBERT GENOVESE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 2, 05 *367-797*

Date

Daytime Phone #