

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000014305

Entity Name: RAINBOW THERAPY SERVICES, INC.

Current Principal Place of Business:

1370 NE 136TH ST.
NORTH MIAMI,, FL 33161

Current Mailing Address:

1370 NE 136TH ST.
NORTH MIAMI,, FL 33161

FEI Number: 27-5239538

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERNANDEZ, ALBANIA
1370 NE 13TH ST
NORTH MIAMI, FL 33161 US

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

Officer/Director Detail :

Title P
Name HERNANDEZ, ALBANIA
Address 1370 NE 136TH ST
City-State-Zip: NORTH MIAMI FL 33161

I hereby 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 all other like empowered.

SIGNATURE: HERNANDEZ , ALBANIA

P

04/29/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date