

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR



98-99 AR
FLORIDA DEPARTMENT OF STATE
Sandra G. Matheson
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 FEB -3 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 366317

1. Corporation Name

RAINBOW ENTERPRISES OF FLORIDA, INC.

Principal Place of Business

7391 N.E. 8TH COURT
BOCA RATON FL 33487

Mailing Address

7391 N.E. 8TH COURT
BOCA RATON FL 33487

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1123 AVONDALE CT.

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

SAME

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL.

City & State

Zip

33409

Country

U.S.A.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/29/1970

5. FEI Number

59-1304731

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | City / State / Zip |
|----------|--------------------------------------|---|---|
| 1 | 2 | 3 | 4 |
| PD | LAUGHLIN, WILLIAM H | 7391 N.E. 8TH CT. 1123 AVONDALE CT. | BOCA RATON FL 33409 WEST PALM BEACH, FL. |
| STD | LAUGHLIN, HELEN A. | 7391 N.E. 8TH CT. 1123 AVONDALE CT. | BOCA RATON FL 33409 WEST PALM BEACH, FL. |
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8. Name and Address of Current Registered Agent

LAUGHLIN, WILLIAM H.
7391 N.E. 8TH COURT
BOCA RATON FL 33487

9. Name and Address of New Registered Agent

Name

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

1123 AVONDALE CT.

Suite, Apt. #, Etc.

City

WEST PALM BEACH

State

FL

Zip Code

33409

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

William H. Laughlin
REGISTERED AGENT MUST SIGN

Date: 12-27-98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

William H. Laughlin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-27-98

561-478-0430

CR2E040 (9/98)