

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 589218

(7)

1. Corporation Name
RAIN PUBLICATIONS, INC.



Principal Place of Business

10100 NW 25TH ST.
MIAMI FL 33172
US

Mailing Address

10100 NW 25TH ST.
MIAMI FL 33172-2209
US

2. Principal Place of Business

21 Suite Apt. # etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite Apt. # etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BRUNJES, ROBERT
10100 NWA 25TH STREET
MIAMI FL 33172

3. Date Incorporated or Qualified
10/12/1978

3a. Date of Last Report
03/27/1996

4. FEI Number
59-1917261

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0552 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, am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature required for principal place of business and for applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	ST	☐ DELETE
NAME	BRUNJES, ROBERT	
STREET ADDRESS	10100 NW 25TH ST	
CITY- ST- ZIP	MIAMI FL	
TITLE	PD	☐ DELETE
NAME	GELFAND, ARTHUR	
STREET ADDRESS	CN 109 CLEARVIEW RD	
CITY- ST- ZIP	EDISON NJ	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY- ST- ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or in the attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/97

706 592-3919

Date Daytime Phone #

CR2E034 (9/96)