

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

96 SEP 13 AM 11:14



1. Name of Limited Partnership		1a. DOCUMENT # A15068	
RAINBOW VENTURE PARTNERS, L.P. LIMITED			
Mailing Address 1524 SE 11TH STREET FORT LAUDERDALE FL 33316		Principal Office Address 1524 SE 11TH STREET FORT LAUDERDALE FL 33316	
2. Mailing Address	2a. Principal Office Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

3. Date Formed or Registered 08/05/1983	5a. Capital Contributions as Shown on record \$2,921.60
3a. Date of Last Report 09/21/1995	5b. Amount of Capital Contributions in FLORIDA to date \$2,368.93
4. State or Country of Formation DE	6. FEI Number 59-2304040 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent KEELER, RICHARD I. 1524 SE 11TH STREET FT. LAUDERDALE FL 33316	10. If changed, new Registered Agent/Office Name 3000001950943 Street Address (P.O. Box Number is Not Accepted) 09/19/96--01003--012 Suite, Apt. #, etc. ****191.25 ****191.25 City FL Zip Code
---	--

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____

DATE **9/9/96**

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
KEELER, RICHARD I	1524 SE 11TH STREET	FT. LAUDERDALE FL 333	A22021

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE _____

DATE **9/9/96**

Typed or Printed Name of General Partner Signing Form

Richard I. Keeler

Daytime Telephone Number

954-524-7021

CR2E003 (6/96)