

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

95 JUL -5 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G18573

(7)

1. Corporation Name

RAINBOW MARKETING, INC.

Principal Place of Business

% IRA REDMIN
4235 NW 37TH AVE
MIAMI FL 33142
US

Mailing Address

% IRA REDMIN
1597 NORTHWEST 81ST AVE.
CORAL SPRINGS FL 33071-6228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1983

3a. Date of Last Report

03/29/1994

4. FEI Number

59-2251869

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Exempt from Franchise Tax

Franchise Tax Exempt

\$5.00 May Be
Added to Fees

8. This corporation has liability for franchise tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 4235 NW 37TH AVE

2a. Mailing Address

28 State Apt #, etc

22 Suite Apt #, etc

27 Suite Apt #, etc

23 City & State

23 Miami FL

28 City & State

28

24 Zip

24 33142

25 Country

25

29 Zip

29

30 Country

30

9. Name and Address of Current Registered Agent

REDMIN, IRA
1597 NORTHWEST 81ST AVE.
CORAL SPRINGS FL 33065

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 607.0502 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and the filer)

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY, ST, ZIP
PD
REDMIN, IRA
1597 NORTHWEST 81ST AVE.
CORAL SPRINGS FL

12.5 TITLE
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY, ST, ZIP
ST
REDMIN, SUSAN
1597 NORTHWEST 81ST AVE.
CORAL SPRINGS FL

12.9 TITLE
12.10 NAME
12.11 STREET ADDRESS
12.12 CITY, ST, ZIP
V
REDMIN, BRAD
1597 NW 81 AVE
CORAL SPRINGS FL

12.13 TITLE
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY, ST, ZIP

12.17 TITLE
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY, ST, ZIP

12.21 TITLE
12.22 NAME
12.23 STREET ADDRESS
12.24 CITY, ST, ZIP

13. ADDITIONAL OFFICERS AND DIRECTORS (SEE INSTRUCTIONS)

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY, ST, ZIP
☐ Change ☐ Addition

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY, ST, ZIP
☐ Change ☐ Addition

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY, ST, ZIP
☐ Change ☐ Addition

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY, ST, ZIP
☐ Change ☐ Addition

13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY, ST, ZIP
☐ Change ☐ Addition

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS
13.24 CITY, ST, ZIP
☐ Change ☐ Addition

14. 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)(b), 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 147, Florida Statutes, and that my name appears in Block 12 or Block 13 (if changed) or as an attachment with an address.

SIGNATURE:

IRA REDMIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/95 305.633-7125
DATE

CR2E034 (3/95)