2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H84024

FILED Jun 06, 2005 Secretary of State

Entity Name: RAINBOW PROPERTY MAINTENANCE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	UMN WOODS FL 34109 (BBLVD. JS		
urrent N	lailing Addre	ss:	New Mailing Addres	s:
	UMN WOODS FL 34109 l	BBLVD. JS		
El Number	: 59-2659379	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
	UMN WOODS	DLVU		
he above	FL 34109 lentity	JS submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
he above the State	FL 34109 lenamed entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above	FL 34109 Lenamed entity e of Florida. RE:			ed office or registered agent, or both, Date
he above the State GNATUI	FL 34109 Use named entity e of Florida. RE: Electrolace with s. 607.19	submits this statement for the particles of Registered Agrada(2)(b), F.S., the corporation did no	ent	
he above the State GNATUI accordan lection Cal	FL 34109 Use named entity e of Florida. RE: Electrolace with s. 607.19	submits this statement for the pair of the pair of Registered Agranges (2)(b), F.S., the corporation did not grow frust Fund Contribution ().	ent ot receive the prior notice.	
he above the State GNATUI accordan lection Cal	e named entity e of Florida. RE: Electrol ce with s. 607.15 mpaign Financin S AND DIREC	submits this statement for the price Signature of Registered Agrange (2)(b), F.S., the corporation did not get Trust Fund Contribution (). CTORS:) Delete AM 201	ent ot receive the prior notice.	Date
he above the State accordan lection Car preficer title: ame: ddress:	e named entity e of Florida. RE: Electrol ace with s. 607.19 mpaign Financin S AND DIREC P (JONES, WILLI P.O. BOX 1102 NAPLES, FL 3	submits this statement for the price Signature of Registered Agraga(2)(b), F.S., the corporation did not grown from Contribution (). CTORS:) Delete AM 201 34108) Delete IN F IBRA	ent of receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM E. JONES PR 06/06/2005