

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J02516

Entity Name: RAINBOW MINI-STORAGE, INC.

FILED
May 03, 2007
Secretary of State

Current Principal Place of Business:

C/O ALICE COLE
9823 W. HILLSBOROUGH AVE.
TAMPA, FL 33615 US

New Principal Place of Business:

Current Mailing Address:

C/O ALICE COLE
2821 NW 106TH AVE.
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-2717717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, ALICE
11513 ARCEA ROAD
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: COLE, ALICE C.,
Address: 9823 W. HILLSBOROUGH AVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: COLE, DANIEL
Address: 2821 NW 106TH AVE
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALICE COLE

PRES

05/03/2007

Electronic Signature of Signing Officer or Director

_____ Date