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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J93508

608 (6)

RAINBOW FINANCIAL SERVICES, INC.

FILED
Jan 15 1997 8:00am
Secretary of State



Principal Prace	of Business	Mailing Addre	SS	·····		T TO BEATAN BING TOLOGO LILLON DELAK ORIGIN HOLL BIRAH			
1841 NW 33RD		1841 NW 33RD	1841 NW 33RD STREET						
FT. LAUDERDALE FL 33309			FT. LAUDERDALE FL 33309-5732						
US		US				3. Date Incorporated or Qualified 09/18/1987		of Last Re 1/1996	eport
2. Principal Pa	ace of Business	2a. Mailing Ad	dress	· · · ·		4. FEI Number	<u> </u>	<del></del>	plied For
21		26	26			65-0007034			t Applicable
Suite, Apt ≢	#, etc.	Suite, Apt	Suite, Apt #, etc			5. Certificate of Status Desired		\$8.75	
22		27						Fee Re	
City & State	9	<b>⊢</b> ¬	City & State			6. Election Campaign Financing	\$5.00 May Be		
23	Country Zip		Country			Trust Fund Contribution	1		
Zip	<del>                                     </del>	<u>├</u> ─┐ ′	30	Country		8. This corporation has liability for i		ax unders. No	. 199.032,
24	25   9. Name and Address of Cu	29 29 20 20 20 20 20 20 20 20 20 20 20 20 20				10. Name and Address of New Re	- 7		
KAD			<u> </u>	81	Name				
KARA, ERNEST J. 1841 NW 33RD ST									×*************************************
	LAUDERDALE FL 33309		1			dress (P.O. Box Number is Not Acceptable)			
1 1. (	EVANCTIONET I C 00000			83				******	
								<del></del>	
				84	City		FL	<b>85</b>   Zip (	Code
11. Pursuant t	to the provisions of Soctions 607.	0502 and 607.1508, Fic	orida Statutes, t	he abov	e-named cor	poration submits this statement for the p	urnose of o	hanging it	s registered
office or re	egistered agent, or both lin the S m familiar with, and accept the o	tate of Florida. Such ch	ange was author	orized b	/ the corbora	ation's board of directors. I hereby accer	ot the appoi	ntment as	registered
	in tartification, and accopt the o	7 1/1	PA	Olalaio			_	- 7-	97
SIGNATURE	Signative: type a or printed up ne of registers	o agert and title if applicable	(NOTE Re	gistereg	and the state of t	life, when separating	DATE		<i></i>
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND [	JIRECTOR	
TITLE	D		DELETE	1.1 TITLE			[	Change	Addition
NAME	Kara, ernest jjr		Č	1.2 NAME					
STREET ADDRESS	1970 NW 33 CT			1.3 STREET	ADDRESS				İ
CITY-SY-ZIP	FT. LAUDERDALE FL			1.4 CHY-5	ST - ZIP				
THILE	D	LJ	DELETE	2.1 TITLE			ι	Change	L Addition
NAME	KARA, ERNEST J			2.2 NAME					
STREET ADDRESS	1841 N W 33ST			2.3 STREE	ADDRESS			•	
CITY-ST-ZIP	FORT LAUDERDALE FL			2. 4 CITY -	ST-ZIP		<del></del>	<del></del>	
TITLE		Ш	DELETE	3.1 TITLE			۱ . ا	Change	Addition
NAME				3.2 NAME			•		
STREET ADDRESS				3.3 STREE					
C11 Y - S1 - ZIP			DELETE	3.4. CITY	ST- ZIP			Change	The Addition
TITLE			DELETE	4.1 TITLE			L	Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS					T ADDRESS				
CITY - S1 - ZIP			DCFETC	4.4 CHY-	ST - ZIP			Change	Addition
TITLE			DELETE	51 TITLE			L	change	L ADDITION
NAME				52 NAME					
STREET ADDRESS					TADDRESS				
CITY - S1 - ZIF			DELETE	5.4 CITY-	SI-ZIP		<u></u>	Change	Addition
TITLE		Ш	DELETE	61 TITLE			L	-1 onange	L. AUGION
NAME				62 NAME					
STREET ADDRESS					1 ADDRESS				
CITY-S1-Zi?	by cost further the edecastics as	unlined with there there do	on not qualify fo	6.4 CITY-		ed in Section 118 07(3)(i) Etarida Statuta	e I further	certify that	the
informatio	by Certify that the INFORMATION SU; as inclinated so this popular resent	Aprica Wall this littly acc	os not quality K	and see	emption statt	ed in Section 119.07(3)(i), Florida Statute	al offect as	if made ur	dor oath: that

14. I do hereby cert fy 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 to languaged, or on an attachment with an address.

SIGNATURE:

SARA 1-7-77
Daytime Prione \*