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Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K05697 (3)

1. Corporation Name
RAINBOW SERVICES, INC., OF JACKSONVILLE

Principal Place of Business

3359 D. BELVEDE ROAD
10364 SERENADE LANE
WEST PALM BEACH FL 33409
US

Mailing Address

PO BOX 16605
WEST PALM BEACH FL 33416-6605
US



3. Date Incorporated or Qualified 11/30/1987	3a. Date of Last Report 12/31/1996
4. FEI Number 65-0032507	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 3359 Belvedere Rd. Suite, Apt. #, etc. 22 Suite D City & State 23 West Palm Beach, FL Zip 24 33406 Country 25 US	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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9. Name and Address of Current Registered Agent

ANTWINE, JESSE LEE JR
13585 BARBERRY DR
WELLINGTON FL 33414

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *J.L. Antwine* J.L. Antwine 3-14-97
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	DELETE <input type="checkbox"/>	1.1 TITLE D	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME ANTWINE, JESSE LEE, JR.		1.2 NAME Antwine, Jesse Lee, JR	
STREET ADDRESS 10364 SERENADE LN.		1.3 STREET ADDRESS 13585 Barberrry Drive	
CITY-ST-ZIP WEST PALM BEACH FL		1.4 CITY-ST-ZIP Wellington, FL 33414	
TITLE D	DELETE <input type="checkbox"/>	2.1 TITLE D	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME ANTWINE, PHYLLIS J.		2.2 NAME Antwine, Phyllis J.	
STREET ADDRESS 10364 SERENADE LN.		2.3 STREET ADDRESS 13585 Barberrry Drive	
CITY-ST-ZIP WEST PALM BEACH FL		2.4 CITY-ST-ZIP Wellington, FL 33414	
TITLE	DELETE <input type="checkbox"/>	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed or on an addition with an address.

SIGNATURE: *J.L. Antwine* J.L. Antwine 3-14-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0007153

CR2E034 (9/96)