2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 19, 2007 08:00 AN
Secretary of State

	ANNUAL REP	ORT	
DOCUMENT #	L03000050241		1

1. Entity Name

RAINBOW APARTMENTS, LLC

Principal Place of Business

Mailing Address

10622 BAMBOO ROD CIRCLE RIVERVIEW, FL 33569 US 10622 BAMBOO ROD CIRCLE RIVERVIEW, FL 33569 US



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

07102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
61-1461705 Applied For
Not Applied be

5. Certificate of Status Desired

5. Status Desired

6. Applied For
Not Applied For

Daytime Phone #

6. Name and Address of Current Registered Agent

MARAJ, SUREEN 10622 BAMBOO ROD CIRCLE RIVERVIEW, FL 33569

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE.					
	Signature, typed or printed name of registered agent and fille if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE	* *	
Filing Fee is \$50.00 Due by September 14, 2007					
9.	MANAGING MEMBERS/MANAGERS			-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARAJ, SUREEN 10622 BAMBOO ROD CIRCLE RIVERVIEW, FL 33569		U00000769498		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	07/19/07-80003-014 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CSTY-ST-ZIP		IN.	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature st billity company or the receiver or trustee empowered to exec	qualify for the exemptions contained in Chapter 11 tall have the same legal effect as if made under or outer this report as required by Chapter 808, Florid	Florida Statutes. I further certify that the informat ath; that I am a managing member or manager of la a Statutes.	ion the	