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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L

1998

L28535

(7)

RAINBOW PAINTERS, INC.

FILED May 13 1998 8:00am Secretary of State

|--|--|

Principal Place of Business Mailing Address			110011011011011011011011011011011011011		211 21211 21211 1221		
C/O WAYNE E. "JAKE" RILEY 1214 VARELA STREET KEY WEST FL 33040			C/O WAYNE E. "JAKE" RILEY				
		1214 VARELA STREET KEY WEST FL 33040		DO NOT WRITE IN THIS SPACE			
MET HED!	10 0000	1101 11001 11 00010	•		3. Date incorporated or Qualified		
					11/06/1989		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0229499		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	+	5 Additional
22		27			5. Certificate of States Desired	f Fe	Required
City & State	9	City & State			6. Election Campaign Financing		00 May Be
23		28			Trust Fund Contribution		led to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid th		
24	25	29	30		Personal Property Tax due June 30. 10. Name and Address of New Register		L No
	g. Name and Address of Curren	t Hegistered Agent	8	1 Name	10. Name and Address of New Registr	atan waatii	
	ILEY, WAYNE E. "JAKE"		•	Name			
	214 VARELA STREET		8	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
K	KEY WEST FL 33040		8			· · · · · · · · · · · · · · · · · · ·	
			*	3			
			8	4 City		85	Zip Code
l						FL "	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State of Florida, Such change wa	tutes, the abo	ve-named co	orporation submits this statement for the purp- ation's board of directors. I hereby accept the	ose of changii e appointmen	ng its registered t as registered
agent la	m familiar with, and accept the obliga	ations of, Section 607.0505,	Florida Statut	es.	and the second of an entire transfer the second of the sec		
SIGNATURE							
	Signature, typed or printed name of registress age			geni signature req	•	AND DIDEC	TODO IN 10
12.	OFFICERS ANI	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Chai	
TITLE	PD PARTY MANAGE E BARNET			1			ingo C recovició
NAME	RILEY, WAYNE E. "JAKE"		1.2 NAM				
STREET ADDRESS	1214 VARELA STREET			ET ADDRESS			
CITY-ST-ZIP	KEY WEST FL	DELETE	1.4 GITY			☐ Chai	nge Addition
TITLE	VP	L) DELETE	2.1 TITLE				rge LI HOURION
NAME	RILEY, ELLEN E		2.2 NAM			: 1	
STREET ADDRESS	1214 VARELA ST			ET ADDRESS			
CITY-ST-ZIP	KEY WEST FL	- Decree		r-ST-ZIP		Cha	nge Addition
TITLE	S STEV FALSA S	☐ DELETE	3.1 TITLE			cha	iño 🗀 Walingt
NAME	RILEY, ELLEN E.		3.2 NAM				
STREET ADDRESS	1214 VARELA ST.			ET ADDRESS			
CITY-ST-ZIP	KEY WEST FL			-ST-ZIP		Cha	nge Addition
TITLE	1	DELETE	4.1 TITLE			€ Cha	iñe 🗂 voneiou
NAME	RILEY, WAYNE E "JAKE"		4. 2 NAN				
STREET ADDRESS	1214 VANELA ST		4.3 STR	ET ADDRESS			
CITY - ST - ZIP	KEY WEST FL			-ST-ZIP		1"7 5:	& all materials
TITLE		☐ DELETE	5.1 TiTL	E		Cha	nge Addition
NAME			5.2 NAM	E			
STREET ADDRESS			53 STRE	ET ADDRESS			
CITY-ST-ZIP			54 CITY	-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL			☐ Cha	nge Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STR	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY	-ST-ZIP			
1 2 1 b 2 2 b 2 2	and the the information associated as	ith the filing door not qualify			in Section 119 07(3\(i)) Florida Statutes I furt	her certify tha	t the information

4. I 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 informatic indicated on this annual report or suppliend 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 if changed, or on an attachment with an address.

CICNIATURE.

a) rune 5.4 Dute

(Wanne E." Ta

4/20/08

(200)294-4837

CR2E034 (10/97