

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002579

FILED
Apr 15, 2010
Secretary of State

Entity Name: RAINBOW HEIGHTS INTERNATIONAL LLC

Current Principal Place of Business:

% VENEVISION STUDIOS
7321 NW 75TH ST
MEDLEY, FL 33166

New Principal Place of Business:

% VENEVISION STUDIOS
7321 NW 75TH ST
MEDLEY, FL 33166 US

Current Mailing Address:

% VENEVISION STUDIOS
7321 NW 75TH ST
MEDLEY, FL 33166

New Mailing Address:

% VENEVISION STUDIOS
7321 NW 75TH ST
MEDLEY, FL 33166 US

FEI Number: 06-1720639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENSEN, JOAN BURTON
% FINSER CORPORATION
121 ALHAMBRA PLAZA - STE 1400
CORAL GABLES, FL 33134 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MONTOYA, GABRIEL E
Address: 121 ALHAMBRA PLAZA, SUITE 1400
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR
Name: TINOCO, PEDRO R
Address: % VENEVISION STUDIOS - 7321 NW 75TH ST
City-St-Zip: MEDLEY, FL 33166 US

Title: P
Name: TINOCO, PEDRO R
Address: % VENEVISION STUDIOS - 7321 NW 75TH ST
City-St-Zip: MEDLEY, FL 33166 US

Title: MGR
Name: ARCAYA, MARIA I
Address: % VENEVISION STUDIOS - 7321 NW 75TH ST
City-St-Zip: MEDLEY, FL 33166 US

Title: S
Name: HERNANDEZ, EDUARDO L
Address: 121 ALHAMBRA PLAZA, SUITE 1400
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PEDRO R. TINOCO

MGR

04/15/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date