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FILED  
May 09 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N94000004774 (5)

1. Corporation Name

WORLD FAMOUS RAINBOW CRUSADERS, INC.

Principal Place of Business

6501 NW 14TH STREET  
SUITE 53  
PLANTATION FL 33313

Mailing Address

P.O. BOX 130183  
SUNRISE FL 33313-0002



3. Date Incorporated or Qualified  
09/27/1994

3a. Date of Last Report  
08/08/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

4. FEI Number

65-0551282

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMPSON, WILLIAM P  
6501 NW 14TH STREET  
SUITE 53  
PLANTATION FL 33313

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-97

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME HOWARD, BARBARA  
STREET ADDRESS 11818 SW 100 TERRACE  
CITY-ST-ZIP MIAMI FL 33186

TITLE VD ☐ DELETE

NAME ROBINSON, ALICE  
STREET ADDRESS 1640 NW 55TH AVE  
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE SD ☐ DELETE

NAME KHAN, NAZMAR  
STREET ADDRESS 6501 NW 14TH STREET, SUITE 53  
CITY-ST-ZIP PLANTATION FL 33313

TITLE TD ☐ DELETE

NAME WALLACE, RALPH  
STREET ADDRESS 2100 N.W. 27TH TERRACE  
CITY-ST-ZIP FT. LAUDERDALE FL 33311

TITLE D ☐ DELETE

NAME THOMPSON, WILLIAM P  
STREET ADDRESS 6501 NW 14TH STREET, SUITE 53  
CITY-ST-ZIP PLANTATION FL 33313

TITLE D ☐ DELETE

NAME MINNERY, JANET  
STREET ADDRESS 6241 N.W. 14TH ST.  
CITY-ST-ZIP SUNRISE FL 33313

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CP2E037 (9/96)