09211999-90024-048-$61.25-$61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 OCT 20 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000003720

1. Corporation Name
R.A.A.N.B.O.W., INC.

Principal Place of Business	Mailing Address
673 LAKE BLVD WESTON FL 33326 US	673 LAKE BLVD WESTON FL 33326 US

2. Principal Place of Business 21 5209 NW 65 Avenue	2a. Mailing Address 26 5209 NW 65 Avenue	3. Date Incorporated or Qualified 06/27/1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0772061 ☐ Applied For ☐ Not Applicable
City & State 23 Lauderhill, Florida	City & State 28 Lauderhill, Florida	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 33319 25	Zip / Country 29 33319 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MYLES, JANICE G. 673 LAKE BLVD WESTON FL 33326	81 Name: Janice G. Myles 82 Street Address (P.O. Box Number is Not Acceptable): 5209 NW 65 Avenue 83 84 City: Lauderhill FL 85 Zip Code: 33319

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 Janice G. Myles — Janice G. Myles — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOODWIN MYLES, JANICE 673 LAKE BLVD. WESTON FL 33326	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Director Janice G. Myles 5209 NW 65 Avenue Lauderhill, Florida 33319	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEGRAND KNIGHT, BETTY 7777 TAM-O SHANTE BLVD. NORTH LAUDERDALE FL 33068	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Officer Director Betty LeBrand Knight 6509 NW 44 Street #614 Lauderhill Florida 33319	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRISON FOX, LORAINE 4172 INVERRARY DRIVE BLDG 7, UNIT 104 LAUDERHILL FL 33319	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Officer Director Kayline Goodwin 10003 Winding Lake Road #205 Sunrise, FL 33351	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	TS	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E017 (5/96)

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Janice G Myles 9-10-99 (954)217-0181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #