2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED May 03, 2004 08:00 AM Secretary of State

DOCUMENT # P02000069301 1. Entity Name RAINBOW ICE INC.			Secretary of State		
8942 RT 52 8	ailing Address 942 RT 52 UDSON, FL 34667		применентемностимостимостимостимостимостимостимостим		
OO NOT WRITE IN THIS SPAC 6. Name and Address of Current Registered Agent			04302004 4. FEI Numb 04-368	No Chg-P er er 10929	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
FOROOQ, RABINA 11431 STONEY BROOK PATH PORT RICHEY, FL 34668	OO NOT WRITE				
8. The above named entity submits this statement for the partner obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title FILE NOWILL FEE IS \$150.00		d Agent signature requires		th, in the State of Florida	a. I am familiar with, and accept
After May 1, 2004 Fee will be \$550.00		led to Fees			
10. OFFICERS AND DIRECT ITILE D FAROOQ, RUGIA STREET ADDRESS 11431 STONY BROOK PATH PORT RICHEY, FL 34668 ITILE D FARODQ, M. STREET ADDRESS 11431 STONY BROOK PATH PORT RICHEY, FL 34668 ITILE D FARODQ, M. STREET ADDRESS 11431 STONY BROOK PATH PORT RICHEY, FL 34668	CTORS			U0000015 05./04/04-80	1392 1043-021 150.00
NAME STREET ADDRESS CITY - ST - ZIP				NOT WE	
INTLE NAME STREET ADDRESS CITY-ST-ZIP INTLE NAME STREET ADDRESS CITY-ST-ZIP CTY-ST-ZIP			(N)	THIS SPA	ICE
ITILE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this findicated on this report or supplemental report is true.	iling does not qualify for the exe	mption stated in States the	ection 119.07(3)	(i), Florida Statutes. I fur	or their certify that the information

AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR