

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035408

Entity Name: ARCOIRIS INFANTIL, INC.

FILED  
Apr 26, 2004  
Secretary of State

## Current Principal Place of Business:

738 DELAWARE AVE. #C  
FORT PIERCE, FL 34950

## New Principal Place of Business:

931 SW 16TH PL  
FORT LAUDERDALE, FL 33315

## Current Mailing Address:

738 DELAWARE AVE. #C  
FORT PIERCE, FL 34950

## New Mailing Address:

PO BOX 268075  
WESTON, FL 33326

FEI Number: 26-0064192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARRIOLA-BENNETT, ANA  
738 DELAWARE AVE. #C  
FORT PIERCE, FL 34950

## Name and Address of New Registered Agent:

ARRIOLA-BENNETT, ANA  
931 SW 16TH PL  
FORT LAUDERDALE, FL 33315

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: ANA ARRIOLA-BENNETT

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ARRIOLA-BENNETT, ANA  
Address: 738 DELAWARE AVE. #C  
City-St-Zip: FORT PIERCE, FL 34950

Title: SVD ( ) Delete  
Name: ARRIOLA, ANA R  
Address: 738 DELAWARE AVE. #C  
City-St-Zip: FORT PIERCE, FL 34950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANA ARRIOLA-BENNETT

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date