

**2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 13, 2012  
Secretary of State**

DOCUMENT# P03000061032

Entity Name: FASHIONS BY RAINBOW, INC.

**Current Principal Place of Business:**

1043 NE 30TH AVE  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

**Current Mailing Address:**

1043 NE 30TH AVE  
HOMESTEAD, FL 33033

**New Mailing Address:**

FEI Number: 54-2112557      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAJON, ALEYDA  
1043 NE 30TH AVE  
HOMESTEAD,, FL 33033      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PAJON, ALEYDA  
Address: 1043 NE 30TH AVE  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: VP  
Name: PAJON, ALEYDA  
Address: 1043 NE 30TH AVE  
City-St-Zip: HOMESTEAD,, FL 33033 US

Title: P  
Name: PAJON, ALEYDA  
Address: 1043 NE 30 TH AVE  
City-St-Zip: HOMESTEAD, FL 33033

Title: P  
Name: PAJON, ALEYDA  
Address: 1043 NE 30 TH AVE  
City-St-Zip: HOMESTEAD, FL 33033

Title: P  
Name: PAJON, ALEYDA  
Address: 1043 NE 30 TH AVE  
City-St-Zip: HOMESTEAD, FL 33033

Title: P  
Name: PAJON, ALEYDA  
Address: 1043 NE 30 TH AVE  
City-St-Zip: HOMESTEAD, FL 33033

I hereby 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 all other like empowered.

SIGNATURE: ALEYDA PAJON

P

07/13/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date