


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90121 004 ***150.00

DOCUMENT # P04000098767 1. Entity Name ART RAINBOW INC.					
Principal Place of Business 1500 N. OCEAN BLVD. SUITE 602 POMPANO BEACH, FL 33062 US			Mailing Address 1500 N. OCEAN BLVD. SUITE 602 POMPANO BEACH, FL 33062 US		
2. Principal Place of Business - No P.O. Box # 2900 W. SAMPLE RD.		3. Mailing Address 2900 W. SAMPLE RD.			
Suite, Apt. #, etc. BOOT 3339		Suite, Apt. #, etc. BOOT 3339			
City & State POMPANO BCH.		City & State POMPANO BCH.			
Zip 33073	Country U.S.	Zip 33073	Country US	4. FEI Number 01-0817528	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WOODSTOCK, DENISE 1500 N. OCEAN BLVD. SUITE 602 POMPANO BEACH, FL 33062			7. Name and Address of New Registered Agent Name WOODSTOCK DENISE Street Address (P.O. Box Number is Not Acceptable) 2900 W. SAMPLE RD. BOOTH 3339 City POMPANO BCH. FL Zip Code 33073		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Denise Woodstock</i></u> 1/30/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOODSTOCK, DENISE 1500 N. OCEAN BLVD., SUITE 602 POMPANO BEACH, FL 33062 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	WOODSTOCK DENISE 2900 W. SAMPLE RD. BOOTH 3339 POMPANO BEACH FL 33073 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>DENISE WOODSTOCK Denise Woodstock</i></u> 1/30/07 954-984-8905 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					