

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04449

Entity Name: RAINBOW TRAVEL TOURS, INC.

FILED  
Oct 05, 2006  
Secretary of State

## Current Principal Place of Business:

9846 STRINGFELLOW RD  
ST. JAMES CITY, FL 33956

## New Principal Place of Business:

1114 CAPE CORAL PARKWAY E  
CAPE CORAL, FL 33904

## Current Mailing Address:

9846 STRINGFELLOW RD  
ST. JAMES CITY, FL 33956

## New Mailing Address:

1114 CAPE CORAL PARKWAY  
CAPE CORAL, FL 33904

FEI Number: 59-2454301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LIOCE, TERESA A  
5400 PELICAN BLVD  
CAPE CORAL, FL 33914 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: TERESA LIOCE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: LIOCE, TERESA  
Address: 5400 PELICAN BLVD  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, 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: TERESA LIOCE

PTD

10/05/2006

Electronic Signature of Signing Officer or Director

Date