

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014086

Entity Name: RAINBOW LANE STUDIOS, INC.

FILED
May 19, 2006
Secretary of State

Current Principal Place of Business:

2504 WALDEN WOODS DR - STE 2
PLANT CITY, FL

New Principal Place of Business:

110 W. REYNOLDS ST.
STE. 207
PLANT CITY, FL 33563

Current Mailing Address:

2504 WALDEN WOODS DR - STE 2
PLANT CITY, FL

New Mailing Address:

110 W. REYNOLDS ST.
STE 207
PLANT CITY, FL 33563

FEI Number: 20-2168809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPICER, SHARON C
204 SUGAR CREEK DR
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

WALDEN LAKE BUSINESS SERVICES INC.
304 E. BAKER ST.
STE D
PLANT CITY, FL 33563 US

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: DAVID DURLAND

05/19/2006

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: P () Delete
Name: SPICER, SHARON C
Address: 204 SUGAR CREEK DR
City-St-Zip: PLANT CITY, FL 33563

Title: D () Delete
Name: SPICER, KENNETH L
Address: 204 SUGAR CREEK DR
City-St-Zip: PLANT CITY, FL 33563

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 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: SHARON SPICER

P

05/19/2006

Electronic Signature of Signing Officer or Director

Date