

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113763

FILED  
Jul 05, 2007  
Secretary of State

Entity Name: RAINBOW PURRFECT MORTGAGE INC.

**Current Principal Place of Business:**

1031 TIMBER LANE  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 740688  
ORANGE CITY, FL 32763998

**New Mailing Address:**

FEI Number: 20-5474964

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRAHAM, LISA J  
1031 TIMBER LANE  
ORANGE CITY, FL 32763 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

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: GRAHAM, LISA J  
Address: 1031 TIMBER LANE  
City-St-Zip: ORANGE CITY, FL 32763

Title: T ( ) Delete  
Name: GRAHAM, LISA J  
Address: 1031 TIMBER LANE  
City-St-Zip: ORANGE CITY, FL 32763

Title: S ( ) Delete  
Name: GRAHAM, LISA J  
Address: 1031 TIMBER LANE  
City-St-Zip: ORANGE CITY, FL 32763

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: LISA GRAHAM

P

07/05/2007

Electronic Signature of Signing Officer or Director

Date