FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra . Mortharif

> Secretary of State DIVISION OF CORPORATIONS

1996

P93000009885 (3) **DOCUMENT #** 1. Corporation Name

RAINBOW EMBROIDERY DESIGNS, INC.



| | Business | | | | | | |
|--|---|---|--|--|--|---|-------------------------------------|
| 1301 WEST O | OPANS ROAD | | COPANS ROAD | | | | |
| SUITE A-25 | | SUITE A-25 | TACU EL 99064 | | | | |
| POMPANO BEACH FL 33064 | | POMPANO I | BEACH FL 33064 | [7 | 3. Date Incorporated or Qualified | 3a. Date of Last Re | - |
| | | | | | 01/29/1993 | 01/19/19 | |
| 2. Principal Place | | 2a. Maiting Add | | - Pa | 4. FEI Number | | pplied For |
| 1 1301 | M COburt 4 | FD 26 1301 | W Capris | > 40 | 65-0387628 | | tot Applicable |
| Suite Apt. #, 0 | 1 | Suite, Apt. # | TC - 7 | b | 5. Certificate of Status Desired | 1 1 v - · · · - | Additional Required |
| City & State | no French Fr | - 28 Cons | | 14 KC | 6. Election Campaign Financing Trust Fund Contribution | Added | May Be to Fees |
| Zφ | Country V 25 See | 7/p 29 33 % | Countr | y 200 | This corporation has liability for Florida Statutes Yes | jntangible tax under s s □ No | 199.032, |
| 4 7706 | 9. Name and Address of Cu | | · | 1 | 0. Name and Address of New I | Registered Agent | |
| | <u> </u> | | 8 | | · S | | |
| COLLEN | SHLOMO | | 8 | Cove | (P.O. Box Number is Not Accepta | ble) | |
| | V 19TH ST. | | ľ | Street Address | 21 WW 13 | Whose | |
| | UT CREEK FL 33063 | | 8 | 3 | | | |
| · COCON | DI CREEK LE 30000 | | 8 | 4 City | Sparre | E1 85 Zij | 23 col / |
| | | | | Core | a should this statement for the ru | roces of changing its r | egistered office |
| 11. Pursuant to | the provisions of Sections 607. | 0502 and 607.1508, Flori Florida, Such change was | da Statutes, trie above s authorized by the co | rporation's board o | n submits this statement for the put f directors. I hereby accept the app | pointment as registered | agent. I am |
| familiar with | and accept the obligations of | Section 607.0505. Florida | Statutes | r | | 1.01 | GI |
| TOTAL SECTION AND | , taka neografica dengangangan | 200000000000000000000000000000000000000 | Ottikatos. | | | | |
| | | 1 | | | | | 2.0 |
| SIGNATURE | gnature, types of princes name of registeres | d agent and tills it applicable | (NOTE: Registered A | gent signature required wh | en reinstating) | DATE | DES IN 12 |
| SIGNATURE | graduse, when or parseas name of regiones OFFICERS | d agent and title it applicable. | (NOTE: Registered A | gent signature required who | | DATE | DRS IN 12 |
| SIGNATURE | graduc, Men or rainess raine of Figures OFFICERS | d agent and tills it applicable | (NOTE: Registered A) 13. LETE 1.1 TITL | gent signature required who | en reinstating) | DATE FICERS AND DIRECTO | |
| SIGNATURE sy | OFFICERS D COHEN, SHLOMO | Dayed and tilt if applicative S AND DIRECTORS | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM | gent signature required who | en reinstating) | DATE FICERS AND DIRECTO | |
| SIGNATURE sylvante | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Day of and tilt if applicative S AND DIRECTORS DE | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI | gent signature required who | ADDITIONS/CHANGES TO OF | DATE FICERS AND DIRECTO | |
| SIGNATURE STATE NAME STREET ADDRESS | OFFICERS D COHEN, SHLOMO | Day-reard tilt it applicates S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 1.3 STRI 1.4 CITY | gent signature required who E E E E E E E T S S S S S S S S S S S S | ADDITIONS/CHANGES TO OF | PRICERS AND DIRECTOR TO Change | ☐ Addition |
| SIGNATURE STATE STREET ADDRESS CITY-ST-ZEF | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Day of and tilt if applicative S AND DIRECTORS DE | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY ELETE 2.1 TITE | F C C C C C C C C C C C C C C C C C C C | ADDITIONS/CHANGES TO OF | DATE FICERS AND DIRECTO | |
| SIGNATURE SITUE NAME STREET ADDRESS CITY-ST-ZEF | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Day-reard tilt it applicates S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM | E EET ADDRESS '-ST-ZIP E EE | ADDITIONS/CHANGES TO OF | PRICERS AND DIRECTOR TO Change | ☐ Addition |
| SIGNATURE Sylvation STREET ADDRESS CITY-ST-20F TITLE | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Day-reard tilt it applicates S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 1.3 STRI 1.4 CITY LETE 2.1 TITL 2.2 NAM 2.3 STRI | EEL ADDRESS EET ADDRESS EET ADDRESS EET ADDRESS | ADDITIONS/CHANGES TO OF | PRICERS AND DIRECTOR TO Change | ☐ Addition |
| SIGNATURE Sylvation 12. THE NAME STREET ADDRESS CITY-ST-20F THE | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilk it applicative S AND DIRECTORS DE TH STREET 33086 | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY | Gent signature required who E BE C-ST-ZIP E BE EET ADDRESS (-ST-ZIP C-ST-ZIP | ADDITIONS/CHANGES TO OF | FICERS AND DIBECTO Change Change | Addition |
| SIGNATURE STUE NAME STREET ADDRESS CITY-ST-ZIE T TE NAME STREET ADDRESS | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Day-reard tilt it applicates S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY LETE 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CITY LETE 3.1 TITL | gent signature required who E E E E E E T S T S E E E E E E E E E E E E | ADDITIONS/CHANGES TO OF | PRICERS AND DIRECTOR TO Change | Addition |
| SIGNATURE STATE STREET ADDRESS CITY-ST-ZIF T TE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilk it applicative S AND DIRECTORS DE TH STREET 33086 | (NOTE: Registered As 13. 13. 14. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STRI 2.4 CITY LETE 3.1 TITI 3.2 NAM | gent signature required who E E E E E T S T S E E E E E E E E E E E E | ADDITIONS/CHANGES TO OF | FICERS AND DIBECTO Change Change | Addition |
| SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TOTAL | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilk it applicative S AND DIRECTORS DE TH STREET 33086 | (NOTE: Registered As 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR | Dent signature required who E E E E E AE E E E AE E E | ADDITIONS/CHANGES TO OF | FICERS AND DIBECTO Change Change | Addition |
| SIGNATURE SIGNATURE SITE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME TITLE NAME NAME | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilt, it applicative S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STRI 2.4 CITY 3.2 NAM 9.5 STRI 3.4 CITY 3.4 CITY | Dent signature required who E E E E E A E E E A E E E | ADDITIONS/CHANGES TO OF | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilk it applicative S AND DIRECTORS DE TH STREET 33086 | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 9.3 STRI 3.4 CITY 4.1 TITL ELETE 4.1 TITL | Dent signature required who E EE AE EE AE EE AE EE AE EE AE AE | ADDITIONS/CHANGES TO OF | FICERS AND DIBECTO Change Change | Addition Addition |
| SIGNATURE SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-ZIF THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME SOREET ADDRESS CHY-ST-ZIP THE NAME SOREET ADDRESS CHY-ST-ZIP THE NAME SOREET ADDRESS CHT-ST-ZIP | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilt, it applicative S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 13 STRI 14 CITY 2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM | Dent signature required who E E E E E E E E E E E E E | ADDITIONS/CHANGES TO OF | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SIGNATURE STREET ADDRESS CITY-ST-ZIP TITLE NAME SIGNATURE STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | ngvet and tilt, it applicative S AND DIRECTORS DE TH STREET 33066 | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 13 STRI 14 CITY 2 NAM 2.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM | Dent signature required who E EE AE EE AE EE AE EE AE EE AE AE | ST PENSESTON | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE SIGNATURE SIRELADORESS CITY-ST-ZIF THE NAME SURELADORESS CITY-ST-ZIP THE NAME SURELADORESS CITY-ST-ZIP THE NAME SURELADORESS CITY-ST-ZIP THE NAME NAME NAME NAME NAME | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | DE D | NOTE Registered Ar 13. | Gent signature required who E.E. I.E. I | STEPPERSON | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIF THE NAME STREET ADDRESS CITY-ST-ZIP TITU NAME STREET ADDRESS CITY-ST-ZIP TITU NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | DE D | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 13 STRI 14 CITY 2 NAM 23 STRI 24 CITY LETE 3.1 TITL 32 NAM 39 STRI 34 CITY 41 TITL 42 NAM 43 STRI 44 CITY 51 TITL 51 | Gent signature required who E.E. I.E. I | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIF THE NAME STREET ADDRESS CITY-ST-ZIP THU NAME STREET ADDRESS CITY-ST-ZIP THU NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | DE D | NOTE Registered Ar 13. | Gent signature required who E.E. I.E. I | STEPPERSON | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE T | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | DE D | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STRI 2.4 CITY 3.2 NAM 3.3 STRI 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY 5.2 NAM 4.3 STRI 4.4 CITY 5.2 NAM | Gent signature required who E.E. I.E. I | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition |
| SIGNATURE STATE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Tayer and site it applicable S AND DIRECTORS DE TH STREET 33066 DE | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 13 STRI 14 CITY 2 1 TITL 22 NAM 23 STRI 24 CITY 31 TITL 32 NAM 33 STRI 44 CITY 41 TITL 42 NAM 43 STRI 44 CITY 51 TITL 52 NAM 53 STRI 54 CITY 53 NAM 53 STRI 54 CITY | Gent signature required who E.E. I.E. I | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DATE FICERS AND DIBECTO Change Change Change Change | Addition Addition Addition Addition |
| SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIF THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Tayer and site it applicable S AND DIRECTORS DE TH STREET 33066 DE | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR | Gent signature required who E E E E E E E E E E E E E | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DAYE FICERS AND DIBECTO Change Change Change | Addition Addition Addition Addition |
| SIGNATURE SIGNATURE STATE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Tayer and site it applicable S AND DIRECTORS DE TH STREET 33066 DE | (NOTE: Registered A) 13. LETE 1. 1 TITL 1.2 NAM 13 STRI 14 CITY 2 1 TITL 22 NAM 23 STRI 24 CITY 31 TITL 32 NAM 33 STRI 44 CITY 41 TITL 42 NAM 43 STRI 44 CITY 51 TITL 52 NAM 53 STRI 54 CITY 53 NAM 53 STRI 54 CITY | Gent signature required who E E E E E E E E E E E E E | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DATE FICERS AND DIBECTO Change Change Change Change | Addition Addition Addition Addition |
| SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-ZIF THE NAME STREET ADDRESS CHY-ST-ZIP THE | OFFICERS D COHEN, SHLOMO 3750 NORTHWEST 197 | Tayer and site it applicable S AND DIRECTORS DE TH STREET 33066 DE | 13. 1 1 1 1 1 1 1 1 1 | Gent signature required who E E E E E E E E E E E E E | SIDDIDITIONS TO OF SURVINOS TO OF SURVINOS SURVI | DATE FICERS AND DIBECTO Change Change Change Change | Addition |

certify that the insormation indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify, 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 12 or Block 13 if changed, or on an attachment with an address.

1.26.96

Deytine Phone of CAB