

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 MAR 14 AM 10:05**

**DOCUMENT # P93000012033 (5)**

1. Corporation Name:  
**RAINBOW ADVENTURES, INC.**

Principal Place of Business      Mailing Address  
**10468 S.W. 53RD ST.  
COOPER CITY FL 33328**      **10468 S.W. 53RD ST.  
COOPER CITY FL 33328**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**03/15/1993**      **04/08/1994**

2. Principal Place of Business      2a. Mailing Address  
**21**      **26**

State, Apt. #, etc.      State, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

9. Name and Address of Current Registered Agent

**YODICE, PATRICIA  
10468 S.W. 53RD ST  
COOPER CITY FL 33328**

10. Name and Address of New Registered Agent

**B1** Name  
**B2** Street Address (P.O. Box Number is Not Acceptable)  
**B3**  
**B4** City      **FL**      **B5** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE      OFFICER/DIRECTOR      DATE

**12. OFFICERS AND DIRECTORS**

12a	DP YODICE, PATRICIA 10468 S.W. 53RD ST. COOPER CITY FL 33328
12b	DVT WALKER, ELIZABETH 10468 S.W. 53RD ST. COOPER CITY FL 33328
12c	DS BUTT, MARY ANN 10468 S.W. 53RD ST. COOPER CITY FL 33328
12d	
12e	
12f	
12g	
12h	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

13a	1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13b	2. NAME
13c	3. STREET ADDRESS
13d	4. CITY - ST - ZIP
13e	21. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13f	22. NAME
13g	23. STREET ADDRESS
13h	24. CITY - ST - ZIP
13i	31. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13j	32. NAME
13k	33. STREET ADDRESS
13l	34. CITY - ST - ZIP
13m	41. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13n	42. NAME
13o	43. STREET ADDRESS
13p	44. CITY - ST - ZIP
13q	51. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13r	52. NAME
13s	53. STREET ADDRESS
13t	54. CITY - ST - ZIP
13u	61. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
13v	62. NAME
13w	63. STREET ADDRESS
13x	64. CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(6)(b), Florida Statutes. I further certify that the information extracted 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 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 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Elizabeth F. Walker*      **ELIZABETH F. WALKER 3-10-95**      **434-9814**