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Jul 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000036170 (6)

1. Corporation Name

RAINBOW CARD PACK PUBLICATIONS, INC.

Principal Place of Business

7251 WEST PALMETTO PARK RD.
BOCA RATON FL 33433

Mailing Address

7251 WEST PALMETTO PARK RD.
BOCA RATON FL 33433-3442

3. Date Incorporated or Qualified
05/13/1994

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0499092

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION
1200 S. PINE ISLAND RD.
PLANTATION FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
RUBERTONE, DONNA J
STREET ADDRESS 7251 W. PALMETTO PARK RD.
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☐ DELETE

NAME D
FOGT, TOM M
STREET ADDRESS 415 SW 8TH ST.
CITY-ST-ZIP TOPEKA KS 66603

TITLE ☐ DELETE

NAME T
HOEFT, JERALD R
STREET ADDRESS 18874 ANCHOR DRIVE
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME S
TICE, JULIE B
STREET ADDRESS 740 NE 89TH STREET
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME DMD
LASTER, RALPH W JR
STREET ADDRESS 415 SW 8TH ST.
CITY-ST-ZIP TOPEKA KS 66603

TITLE ☐ DELETE

NAME D
HEITZ, MARK V
STREET ADDRESS 415 SW 8TH ST.
CITY-ST-ZIP TOPEKA KS 66603

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 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 if changed, or on an attachment with an address.

JERALD R. HOEFT

01/08/97 (61)39494

CR2E034 (9/96)