

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000032656

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: RAINBOW CRAFT INTERNATIONAL, CORP.

## Current Principal Place of Business:

410 WEST 49TH STREET  
101-104  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

410 WEST 49TH STREET  
101-104  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 65-0629761      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BENZAQUEN, GASTON  
1831 VICTORIA POINT CIRCLE  
WESTON, FL 33327      US

## Name and Address of New Registered Agent:

BENZAQUEN, GASTON  
6000 ISLAND BLVD  
1008  
AVENTURA, FL 33160 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: GASTON BENZAQUEN

04/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BENZAQUEN, BRIGITTE B  
Address: 10155 COLLINS AVE #906  
City-St-Zip: MIAMI BEACH, FL 33154

Title: VTD ( ) Delete  
Name: BENZAQUEN, GASTON  
Address: 10155 COLLINS AVE #906  
City-St-Zip: MIAMI BEACH, FL 33154

Title: SD ( ) Delete  
Name: BENZAQUEN, ABRAHAM  
Address: 10155 COLLINS AVE #906  
City-St-Zip: MIAMI BEACH, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BENZAQUEN, GASTON B  
Address: 6000 ISLAND BLVD APT # 1008  
City-St-Zip: AVENTURA, FL 33160

Title: VTD (X) Change ( ) Addition  
Name: BENZAQUEN, BRIGITTE  
Address: 10155 COLLINS AVE #906  
City-St-Zip: MIAMI BEACH, FL 33154

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: GASTON BENZAQUEN

PD

04/05/2006

Electronic Signature of Signing Officer or Director

Date