## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Apr 23, 2001 8:00 am Secretary of State DOCUMENT # **P96000065997** RAINBOW CAFE, INC. 04-23-2001 90032 050 \*\*\*150.00 Principal Place of Business Mailing Address 7240 55TH AVE E 5108 20TH AVE W **BRADENTON FL 34202** BRADENTON FL 34209 U\$ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0698492 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GIGLIO, LISA Street Address (P.O. Box Number is Not Acceptable) 5108 20TH AVE W **BRADENTON FL 34209** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change Addition TITL F ☐ Delete TITLE GIGLIO, DOMINICK J NAME NAME 5108 20TH AVENUE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Change ☐ Delete TITLE ☐ Addition TITLE GIGLIO, JEANETTE NAME NAME STREET ADDRESS 5108 20TH AVENUE WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Change Addition ☐ Delete TITLE TITLE NAME DEDONA, FRANCINE NAME STREET ADDRESS 5108 20TH AVENUE WEST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP TD ☐ Delete TITLE ☐ Change Addition TITLE NAME GIGLIO, LISA NAME STREET ADDRESS 5108 20TH AVENUE WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information fland accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the ompowered. 13. I hereby certify that the information supplied indicated on this report or supplemental of the corporation or the receiver or trust changed, or on an attachment with an

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