

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90474 037 ***163.75

DOCUMENT # P98000035431

1. Entity Name
RAINBOW RIDER PRODUCTIONS, INC.



Principal Place of Business
**4110 NW 8TH TERRACE
POMPANO BEACH FL 33064**

Mailing Address
**4110 NW 8TH TERRACE
POMPANO BEACH FL 33064**



2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0850208**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**CELLUCCI, DANIEL
4110 NW 8 TERRACE
POMPANO BEACH FL 33064**

7. Name and Address of New Registered Agent

Name **Brenda Cellucci**
Street Address (P.O. Box Number is Not Acceptable)
4110 NW 8th Terrace
City **Pompano Beach, FL** Zip Code **33064**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Brenda Cellucci** **President**

3/14/03
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☒ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☒ Delete
NAME **CELLUCCI, DANIEL**
STREET ADDRESS **4110 NW 8TH TERRACE**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **DV** ☐ Delete
NAME **COSTA, STEVEN**
STREET ADDRESS **4848 NORTHWEST 24 COURT #313**
CITY-ST-ZIP **LAUDERDALE LAKES FL 33313**

TITLE **T** ☐ Delete
NAME **CELLUCCI, BRENDA** **(Change Status)**
STREET ADDRESS **4110 NW 8TH TERRACE**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President / DP** ☒ Change ☐ Addition
NAME **Brenda Cellucci**
STREET ADDRESS **4110 NW 8th Terrace**
CITY-ST-ZIP **Pompano Beach, Fla 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Cellucci

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/03

Date

877-785 3073

Daytime Phone #

CR2E034 (10/02)