

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 06, 1999 8:00 am
Secretary of State

08-06-1999 90007 006 ***150.00

DOCUMENT #

P98000045164

1. Corporation Name

RAINBOW LIQUIDATORS, INC.

Principal Place of Business

Mailing Address

2216 NORTH DIXIE HIGHWAY
WILTON MANORS, FLORIDA 33305

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

May 18, 1998

4. FEI Number

65-0844168

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. 2216 N. Dixie Hwy.
Suite, Apt. #, etc.

26. Same
Suite, Apt. #, etc.

22. None
City & State

27. None
City & State

23. Wilton Manors, Fl. 33305
Zip Country

28. Same
Zip Country

24. 33305 25. USA

29. Same 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RONALD M. HARRIS
2216 N. Dixie Highway
Wilton Manors, Florida 33305

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR./PRESIDENT
TERRY GILDER
2216 N. DIXIE HIGHWAY
WILTON MANORS, FL. 33305

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR./V.P. RONALD M. HARRIS
2216 N. DIXIE HIGHWAY
WILTON MANORS, FL. 33305

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIR./SEC./TREAS.
ALISON DAVIS
2216 N. DIXIE HIGHWAY
WILTON MANORS, FL. 33305

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY GILDER, DIR., PRESIDENT

July 29, 1999 (954) 564-3504

Date

Daytime Phone #

CR2E034 (1/98)