2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2007 08:00 AM Secretary of State

DOCL	IMENT	# P99000037993
DCC		# 1 33000001 333

1. Entity Name

RAINBOW VIDEO PRODUCTIONS, INC.



Principal Place of Business

Mailing Address

7333 JASMIN DRIVE NEW PORT RICHEY, FL 34652 7333 JASMIN DRIVE NEW PORT RICHEY, FL 34652



DO NOT WRITE IN THIS SPACE

01052007 No Chg-P CR2E034 (11/05)

F. Contilianto of Status Desired

4. FEI Number

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VAN ETTEN, DEANA B 7333 JASMIN DRIVE NEW PORT RICHEY, FL 34652

DO NOT WRITE IN THIS SPACE

				1114	INIS SPACE		
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 Signature. Noted or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	-		
10. ITTLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD VAN ETTEN, DEANA B 7333 JASMIN DRIVE NEW PORT RICHEY, FL 34652 SD VAN ETTEN, MARVIN 7333 JASMIN DRIVE NEW PORT RICHEY, FL 34652	CTORS		DO	U00000580731 01/10/07-80060-013 150.00 NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE		
TITLE							

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attackfluent with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

HONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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727-842-6243

Daytime Phone #