FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

| | 1996 | DIVISION OF C | CORPORATIONS | | |
|---|---|--|---|--|---|
| DOCUI 1. Corporation | MENT # \$751 6 | 67 (4) | | | |
| RAINBO | OW GUTTERS AND SIDIN | G, INC. | | 1 MARIA III III 1000 0 000 1100 1100 1 | OZI GIBIJ OSEJI DIGIJ BIDIJ GIBIJ OJEJI OJEJI |
| Principal Place | e of Business | Maling Address | | | |
| 6810 E. ROGERS CIRCLE | | 6810 E. ROGERS CIRCLE | E | | |
| BOCA RATOR | | BOCA RATON FL 33487 | - | | |
| | | | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | 08/22/1991 4. FEI Number | 05/01/1995 |
| 1 | 20011007 | 26 | | 65-0278084 | Applied For Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | Certificate of Status Desired | - \$8.75 Additional |
| 2 | | 27 | | | Fee Required |
| City & State |) | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Ζip | Country | Zip | Country | 8. This corporation has liability for it | |
| 4 | 9 Name and Address of Cour | 29 | 30 | Florida Statutes 🔲 Yes | T2No |
| | 9. Name and Address of Curr | ent Registered Agent | 81 Name | 10. Name and Address of New Ro | egistered Agent |
| DENICE | MIKHAH | | | | |
| | OODSPRING DR | | 82 Street | Address (P.O. Box Number is Not Acceptabl | e; |
| | ATON FL 33428 | | 83 | | |
| | | | 84 City | | |
| | | | 1 1 7 | | FL 85 Zip Code |
| Pursuant t or register | to the provisions of Sections 607.05 ed agent, or both, in the State of Flo | 02 and 607.1508, Fiorida Statutes or (Li. Such change was authorized | s, the above-named oc | progration submits this statement for the purp board of directors. Thereby accept the appo | pose of changing its registered offici |
| familiar wit | th, and accept the obligations of, Sc | ection 607.0505, Florida Statutes. | artly the corporation's | obard of directors. Thereby accept the appo | intment as registered agent. Lam |
| SIGNATURE _ | Signature: Typast or protect more of requires as | State of the Advantable 1990 State | El fred de ned Agent signatus ri | | |
| 12. | | AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | DATE DERS AND DIRECTORS IN 12 |
| TITLE | P | DELFTE | | | |
| NAME | MIKHAIL, DENICE | | I 1 TITL€ | PAESIDENT . | Change Addition |
| STREET AMONGOOD | | | I 1 TITLE 12 NAME | LUEZING WI | Change Addition |
| | 22290 WOODSPRING DR | | | INETINENT. | Change Addition |
| CITY-ST-ZIP | 22290 WOODSPRING DR BOCA RATON FL | | 1.2 NAME 1.3 STHEET ADDRESS 1.4 CITY - ST - Z-P | | |
| CITY-ST-ZIP DITLE | | DETELE | 12 NAME 13 STHEFT ADDRESS 14 DITY-ST-ZP 2 1 TITLE | VICE PAGSIDENT | Chanas M. Mattier |
| CITY-ST-ZIP CITLE NAME | | | 12 NAME 13 STHEFT ADDRESS 14 CITY - ST - Z P 2 1 TITLE 22 NAME | VICE PAGSIDENT | Chanas M. Mattier |
| HTY-ST-ZIP HTLE MAME HTREET ADDRESS | | | 12 NAME 13 STHEET ADDRESS 14 CHY-ST-ZP 2 1 TOLE 2 2 NAME 2 3 STREET ADDRESS | VICE PRESIDENT MANK LYTTERBENGER 114 60 CLEAR (REEK P | Chanas M. Mattier |
| CITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP | | | 12 NAME 13 STHEFT ADDRESS 14 CITY - ST - Z P 2 1 TITLE 22 NAME | | Chanas M. Mattier |
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occasion on minute report is true and accurate and that my signature shall have the same legal effect as if made under occasion or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name tent with an accuracy. oath; that I am an officer or dir appears in Block 12 or Block

SIGNATURE:

G OF FIGER ON DIRECTOR