561-832-6698

5-30-98

CINCIOLMARMOTEL

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

SIGNATURE:

PROFIT FLORIDA DEPARTMENT OF, STATE CORPORATION Sandra B. Mortham 98 OCT 26 PM 12: 58 ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS SECRETARY OF STATE TALL AHASSEE, FLORIDA **DOCUMENT #** H34305 (3) 1. Corporation Name BRIGHT IMAGE, INC. Mailing Address Principal Place of Business 375 N.E. 3RD ST. 375 N,E. 3RD ST. DELRAY BEACH FL 33483 DELRAY BEACH FL 33483 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 12/17/1984 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2484058 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zio Country Zio Country 8. This corporation owes or has paid the current year intangible Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LITTLE, MARK D. B. Jay Little 375 N.E. THIRD ST. Street Address (P.O. Box Number is Not Acceptable) DELRAY BEACH FL 33483 Crofor 83 City Zip Code 84 West Palm BCL 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 for 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 (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE ___ Change ___ Addition X DELETE Little, Jay LITTLE, MARK D. 1.2 NAME NAME 324 Croson way 1220 N. SWINTON AVE. 1.3 STREET ADDRESS STREET ADDRESS West Pala Bch Fl. 33401 DELRAY BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE D۷ DELETE 2.1 TITLE Change Thomas, Brian L Corpnorant Pd. NAME LITTLE, JAY B. 2.2 NAME New President 3913 324 CROTON WAY STREET ADDRESS 2.3 STREET ADDRESS W PALM BCH FL Delray Bux 33444 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Os Welden, Glen 1013 N.E. 5 ___ Change Addition MORRISON, DALE F. 3.2 NAME NAME 3757 LONE PINE RD. STREET ADDRESS 3.3 STREET ADDRESS Pomparo, F1. 33060 DELRAY BEACH FL CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE **S**DELETE 4.1 TITLE D XX Change LITTLE, GERALDINE 4.2 NAME NAME 516 Sandpiper Circle 1300 NW 4TH AVE. STREET ADDRESS 4.3 STREET ADDRESS DELRAY BCH. FL Delrav Beach. Florida 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE TITLE DELETE Addition 5.2 NAME NAME LITTLE, KIM H. 324 CROTON WAY 5.3 STREET ADDRESS STREET ADDRESS W PALM BCH FL 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition DS 6.2 NAME NAME NOW V.P. Brian Thomas 6.3 STREET ADDRESS STREET ADDRESS \$488.75 Returned 375 NE 3rd Street spolect DEP \$550,00 6.4 CITY-ST-ZIP 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 tuttiner 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.