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

PROFIT CORPORATION ANNUAL REPOR 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT# L38143

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90038 050 ***150.00

1. Corporation Name A TOUCH OF BRILLIANT'S INC. Mailing Address Principal Place of Business 1901 BROADWAY 1901 BROADWAY RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 12/26/1989 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0162276 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired П Fee Required 22 27 City & State City & State__ \$5.00 May Be 6.-Election Campaign Financing-Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8.. This corporation owes the current year Intangible Personal Property Tax. 25 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BRILLIANT, JILL D 4626 WILLOW POND CT.E. Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33417 83 84 City 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 of 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, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 11TM F TITLE BRILLIANT, STEVE 1.2 NAME NAME 4626 WILLOW POND CT. E. 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 2.1 TITLE TITLE BRILLIANT, JILL NAME 22 NAME 4626 WILLOW POND CT. E. 2.3 STREET ADDRESS W. PALM BEACH FL 2.4 CITY-ST-ZIP C!TY-ST-ZIF ☐ DELETE 3.1 TITLE 3.3 STREET ADDRESS t pach ceases STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP C DELETE Change ☐ Addition TITLE S 1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 61 TITLE TILE NAME : 6.3 STREET ADDRESS CITY-ST-ZIP 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

561-844-6152

CR2E034 (11/98)