•	3
	ς
u	ı
_	٠
=	
o	١
n.	١
•	•
•	
ъ	۲
2	_
п	1

200	1 UNIFO	RM BUS	INE	SS REPO	RT	(UBR)					0031158
1. Entity Nam			000	00494			•	· •	•		٠,	58 AB
STEVEN D. BRIGHT CO., LL.C								FILED				
Principal Place of Business Mailing Address								OLMAR 16 PM	Յ։ կե	ŧ		
		17 SNYDER ROAD EST LAWN PA 19609				SECRETARY OF STATE						
								マン・1 しいしょへの亡に	~ 1 A CU O			
2. Principal Place of Business 3. Mailing Address								E IODIOAIS III BOIN OBIII OOMA O		883)(29(() 8(8)8	Q	
Suite, Apt. #, etc. Suite, Apt. #, etc.							DO NOT WRITE IN THIS SPACE				_	
City & State				City & State			" '-	4. FEI Number Applied For 201-56-1284 Not Applicable				
Zip	i	ountry		ip .	Cour	itry /	5 . Ce	rtificate of Status Desired		\$5.00 Add Fee Require		
	6. Name and	Address of Curren	t Regist	ered Agent		Name	7. Na	me and Address of New I	Registered	Agent		-
C T CORPORATION SYSTEM					Street Add	iress (P.O. Box	Number is Not Acceptable	2)			-	
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324												
					City			F	L Zip Code	9		
8. The above	e named entity sub	mits this statement f	or the p	urpose of changing its	register	ed office or re	egistered agen	t, or both, in the State of Fl	orida.			
SIGNATURE .	Signature, typed or print	ed name of registered agen	t and title if	applicable. (NOTE	: Registere	d Agent signature	required when reinst	tating)	DATÉ			-
				FILE NO Make Check Pa		FEE IS \$50 o Departm			3 91: 7/01 *50.00	-01061	005	
9.		MANAGING MEME	BERS/M	EMBERS	10.		<u> </u>	ADDITIONS	/CHANGE			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	120 5. 10	. Bright obeson St.		☐ Delete						Change	☐ Addition	33 (11/
TITLE	Robesonia	a, PA 1955	<u>.l</u>	☐ Delete	TITL					·Change	Addition	CR2E06
NAME STREET ADDRESS CITY-ST-ZIP						E ET ADDRESS - ST-Zip		•	L	✓		
TITLE - NAME		<u>.</u>		Delete	TITLI	E	· · - · ·		f	Change	Addition]
STREET ADDRESS CITY-ST-ZIP				+		ET ADDRESS -ST-ZIP						
TITLE NAME				☐ Delete	TITLI NAM					☐ Change	☐ Addition	
STREET ADDRESS City-St-Zip						ET ADDRESS -ST-ZIP						
TITLE NAME 13				☐ Delete	TITLI					☐ Change	☐ Addition]
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS - ST- ZIP						
TITLE NAME		* <u> </u>		☐ Delete	TITLE					☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP					STRE	ET ADORESS - ST-ZIP						
indicated	l on this report is tr	ue and accurate and	d that my		he same	e legal effect	as if made und	9.07(3)(i), Florida Statutes. der oath; that I am a mana Florida Statutes.				
ameu lla	Julia Company of		14	_	St		Bright		11 /6	10) 678-	.1013	
SIGNAT	TURE: 3	PED OR PRINTED NAME	OF SIGNIN	G MANAGING MEMBER, MAN		٠٠		3/9/C	7 (0	Daytime Phone #	1713	