

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JUN -4 PH 5:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P00000031654**

**1. Corporation Name**

Brightness International, Corp.

13935 NW 1st Ave  
13935 NW 1st Ave

**2. Principal Office Address**

13935 NW 1st Ave

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33168

Country

US

**3. Mailing Office Address**

13935 NW 1st Ave

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33168

Country

US

**4. Date Incorporated or Qualified**

To Do Business in Florida 03/24/00

**5. FEI Number**

650996263

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

100037665801  
06/04/04--01033--019 \*\*300.00

REINSTATEMENT 02-04

**7. Name and Address of Current Registered Agent**

Name

Ray Perez & Associates, PA

Street Address (P.O. Box Number is Not Acceptable)

13935 NW 1st Ave

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33168

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*Ray Perez* / *Prm.*

REGISTERED AGENT MUST SIGN

Date

6/1/04

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Antonio Carlos Quintas de Barros	13935 NW 1st Ave	Miami, FL. 33168
D	Denise Vergiani de Barros	13935 NW 1st Ave	Miami, FL. 33168

**10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Antonio C. Quintas, Director*

Date

05/31/04

Daytime Phone #

305-688-9694

CR2E081 (01/04)

June 1, 2004

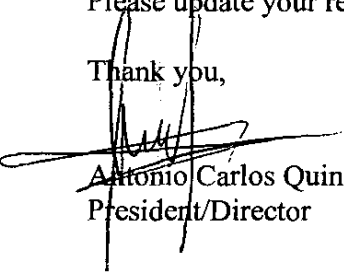
State of Florida Div of Corp  
Po Box 6327  
Tallahassee, Fl. 32314

RE: Brightness International, Corp  
P00000031654

To whom it may concern:

We never received the renewal form for the above corporation. Enclosed please find a check for \$450.00 for the renewal fees for three years and also a reinstatement form. Please update your records accordingly.

Thank you,



Antonio Carlos Quintas de Barros  
President/Director