FILED
Mar 20, 2003 8:00 am
Secretary of State

03-20-2003 90109 028 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000011473

1. Entity Name
KID BRILLIANT, INC.

20026323

Principal Place of Business
~~4632 FOREST HILL BLVD.~~
~~STE 295~~
~~WEST PALM BEACH, FL 33415~~

Mailing Address
~~4632 FOREST HILL BLVD.~~
~~SUITE 295~~
~~WEST PALM BEACH, FL 33415~~

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6342 Forest Hill Blvd	Same
Suite, Apt. #, etc.: # 295	Suite, Apt. #, etc.: Same
City & State: Greenacres, Fla.	City & State: Same
Zip: 33415 / Country: USA	Zip: Same / Country: Same

4. FEI Number: 65-1113396 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, DANIEL
~~4632 FOREST HILL BLVD.~~ 6342 Forest Hill Blvd #295
~~SUITE 295~~
~~WEST PALM BEACH, FL 33415~~ Greenacres, Fla. 33415

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Daniel Miller 3-18-03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! Fee is $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MILLER, DANIEL ~~4632 FOREST HILL BLVD #295~~ ~~WEST PALM BEACH, FL 33415~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Miller, Daniel 6342 Forest Hill Blvd # 295 Greenacres, Fla 33415	☒ Change ☐ Addition
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CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel Miller 3/18/03 561-741-1680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #