

May 01 07 12:55p

**FILED**  
**May 16, 2007 8:00 am**  
**Secretary of State**

05-16-2007 90023 037 \*\*\*150.00

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P01000071571</b>		
1. Entity Name <b>BRIGHT JANITORIAL MAINTENANCE INC.</b>		
Principal Place of Business <b>23323 TREE LINE DR BOCA RATON, FL 33428</b>		Mailing Address <b>23323 TREE LINE DR BOCA RATON, FL 33428</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
		
05012007 No Chg-P CR2E034 (11/05)		
4. FEI Number <b>NOT APPLICABLE</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>
6. Name and Address of Current Registered Agent <b>CASTAGNA, JOSEPH 23323 TREE LINE DR BOCA RATON, FL 33428</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)</small> DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PSTD CASTAGNA, JOSEPH 23323 TREE LINE DR BOCA RATON, FL 33428	
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<b>DO NOT WRITE IN THIS SPACE</b>		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 info empowered.		
SIGNATURE: <i>Joseph Castagna</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<i>561-470-3302</i> <i>JOSEPH CASTAGNA</i> <i>MAY-1-2007</i> <small>Date Daytime Phone #</small>