2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000052082

Entity Name: BRIGHT FUTURE USA, CORP.

FILED Jul 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1516 E. COLONIAL DRIVE 10232 PARK ROW CT

ORLANDO, FL 32832 US SUITE 107 ORLANDO, FL 32803

New Mailing Address: Current Mailing Address:

1516 E. COLONIAL DRIVE 10232 PARK ROW CT SUITE 107 ORLANDO, FL 32832 US

ORLANDO, FL 32803 US

FEI Number: 03-0465007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MANTELLINI LOVERA, HECTOR MANTELLINI, HECTOR 1516 E. COLONIAL DR 10232 PARK ROW CT SUITE 107 ORLANDO, FL 32832 US ORLANDO, FL 32803 US

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.

SIGNATURE: HECTOR MANTELLINI 07/08/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name: Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

MANTELLINI LOVERA, HECTOR MANTELLINI, HECTOR Name: Name: 1516 E. COLONIAL DR SUITE 107 10232 PARK ROW CT Address: Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: ORLANDO, FL 32832 US

() Delete Title: DVP Title: DVP (X) Change () Addition

Name: LEMUS RODRIGUEZ, JOSE A Name: FLEITAS, CARLA 1516 E. COLONIAL DR SUITE 107 10232 PARK ROW CT Address: Address: ORLANDO, FL 32803 US ORLANDO, FL 32832 US City-St-Zip: City-St-Zip:

(X) Change () Addition Title: DT () Delete Title: DT

FLEITAS, CARLA GARZA, ALFREDO Name: Name: 1516 E. COLONIAL DR SUITE 107 10232 PARK ROW CT Address: Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: ORLANDO, FL 32832 US

Title: DS (X) Delete Title: () Change () Addition

GARZA, ALFREDO Name: 1516 E. COLONIAL DR SUITE 107 Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HECTOR MANTELLINI DP 07/08/2006