

FROM : CARMEN FRANKHOUSE CPA

FAX NO. : 954 447 9541

Jun. 29 2004 09:31AM P1

FILED**Jul 02, 2004 08:00 AM**
Secretary of State**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000074915 1. Entity Name BRIGHT START EDUCATIONAL CENTER INC.		
Principal Place of Business 514 W 51ST PL HIALEAH, FL 33012	Mailing Address 514 W 51ST PL HIALEAH, FL 33012	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FIGUEROA, NIDIA 7335 W 14TH CT HIALEAH, FL 33014		
DO NOT WRITE IN THIS SPACE		
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 _____ Signature, typed or printed name of registered Agent and title if applicable. (NOTE: Registered Agent signature required when re-stating)		
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FIGUEROA, NIDIA 7335 W 14TH CT HIALEAH, FL 33014	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COTERA, NIDIA D 7335 W 14TH CT HIALEAH, FL 33014	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000163053 07/02/04-80002-012 550.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: <i>Nidia Figueroa</i> 6/28/04 (305) 546-7518 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		