

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

04 MAR 31 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000000057

1. Corporation Name

BRIGHT FUTURE OF PALM BEACH, INC.

Principal Place of Business

212 CHILLINGWORTH DR.
W. PALM BCH FL 33409

Mailing Address

212 CHILLINGWORTH DR.
W. PALM BCH FL 33409

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/24/2002

5. FEI Number

F13422889

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
President	DONNA JAMES, President	2804 Whisty Oaks Circle	Royal Palm Beach, FL 33411

600030235736
03/10/04--01052--022 ***308.75

8. Name and Address of Current Registered Agent

JAMES, DONNA A
212 CHILLINGWORTH DR.
W. PALM BCH FL 33409

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State / Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Donna James

REGISTERED AGENT MUST SIGN

Date

3/27/04

11. 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:

Donna James

DONNA JAMES

3/9/04

561-616-5069

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

March 9, 2004

Donna James, President
Bright Future of Palm Beach, Inc.
212 Chillingworth Dr.
West Palm Beach, FL 33409
561-616-5069
413-374-3746

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

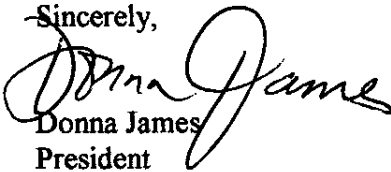
RE: Application For Reinstatement

To Whom It May Concern:

I am hereby requesting a wavier as I did not received the information to apply for reinstatement until today, March 9, 2004. Enclosed is my application fee of \$300.

Thank you for your assistance.

Sincerely,


Donna James
President