

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

04-13-2005 90038 002 ***150.00

FILED P04000003134

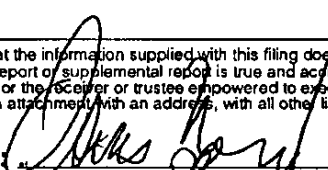
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

20051330



1st MOORE CR2E034 (10/04)

DOCUMENT # P04000003134					
1. Entity Name BEYOND BRILLIANCE, INC.					
Principal Place of Business 1051 PINERO AVE CORAL GABLES FL 33134			Mailing Address 1051 PINERO AVE CORAL GABLES FL 33134		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 25-222 2233	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent NUNEZ, OSIRIS L 1051 PINERO AVE CORAL GABLES FL 33134				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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					
TITLE	P	☐ Delete			
NAME	NUNEZ, OSIRIS L				
STREET ADDRESS	1051 PINERO AVE				
CITY-ST-ZIP	CORAL GABLES FL 33134				
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Delete			
NAME					
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STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE		☐ Change ☐ Addition			
NAME	REINSTATEMENT				
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME	T. Roberts				
STREET ADDRESS	1051 PINERO AVE				
CITY-ST-ZIP	CORAL GABLES FL 33134				
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		☐ Change ☐ Addition			
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 of 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 officer 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  OSIRIS L. NUNEZ 03-24-05 305-527-7522					
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

PJ 282

Memorandum 06/05

Fla Dept of State
Tallahassee, Florida

Ref: Entity:

Beyond Brilliance Inc

1051 Piner Ave

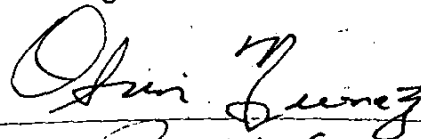
Coral Gables, FL 33134

Document #: P.04000003134

Dear Sirs:

We received notice of Disposition or Revocation,
but it is incorrect, as you can see in the
attached photocopies of the form 2000 Annual
Report dated 03-29-05 filed with you,
and the check #1088 dated 04-07-05 paid by
Transatlantic Bank on 04-20-2005 for \$150.00

Thank you in advance



President

Oscar Suarez