2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2007
Secretary of State

DOCUMENT# P06000017752

Entity Name: BELLA BRITE SERVICES, INC.

Current Principal Place of Business:

4423 LAUREL PLACE
WESTON, FL 33322

New Principal Place of Business:

692 SPINNAKER
WESTON, FL 33326

Current Mailing Address:

4423 LAUREL PLACE
WESTON, FL 33322

New Mailing Address:

692 SPINNAKER
WESTON, FL 33326

FEI Number: 20-4288604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OPTIMUM TAX SERVICES, INC.
335 SOUTH KROME AVENUE
SUITE #104
FLORIDA CITY, FL 33034 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: NIGRO, DINO G
Address: 335 SOUTH KROME AVENUE, SUITE #104
City-St-Zip: FLORIDA CITY, FL 33034

Title: VSD ( ) Delete
Name: NIGRO, CYNTHIA M
Address: 335 SOUTH KROME AVENUE, SUITE #104
City-St-Zip: FLORIDA CITY, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: NIGRO, DINO G
Address: 692 SPINNAKER
City-St-Zip: WESTON, FL 33326

Title: VSD (X) Change ( ) Addition
Name: NIGRO, CYNTHIA M
Address: 692 SPINNAKER
City-St-Zip: WESTON, FL 33326

I hereby certify that the information supplied with this filing does not qualify 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: DINO NIGRO P 05/29/2007

Electronic Signature of Signing Officer or Director — Date