

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000017752

Entity Name: BELLA BRITE SERVICES, INC.

FILED
Jan 26, 2008
Secretary of State

Current Principal Place of Business:

692 SPINNAKER
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

692 SPINNAKER
WESTON, FL 33326

New Mailing Address:

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:

NIGRO, DINO
692 SPINNAKER
WESTON, FL 33326 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: DINO NIGRO

01/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

01/26/2008

Electronic Signature of Signing Officer or Director

Date