

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121398

FILED  
Jul 28, 2008  
Secretary of State

Entity Name: BRASBRIGHT SERVICES, CORP.

**Current Principal Place of Business:**

1231 W. COPANS ROAD  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

1231 W. COPANS ROAD  
POMPANO BEACH, FL 33064

**New Mailing Address:**

FEI Number: 20-5592193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DESOUSA, JULIO C  
1231 W COPANS RD  
POMPANO BEACH, FL 33064 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: PTSD ( ) Delete  
Name: DE SOUSA, JULIO CESAR  
Address: 1231 W. COPANS ROAD  
City-St-Zip: POMPANO BEACH, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTSD (X) Change ( ) Addition  
Name: DESOUSA, JULIO C  
Address: 1231 W. COPANS ROAD  
City-St-Zip: POMPANO BEACH, FL 33064

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: JULIO DESOUSA

PTSD

07/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date