

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000057102 (4)

1. Corporation Name

BRIGHTSOFT, INC.



Principal Place of Business

2451 E BURR OAK CT
SARASOTA FL 34232

Mailing Address

2451 E BURR OAK CT
SARASOTA FL 34232

2. Principal Place of Business

21 5122 SANDY BEACH AVE

Suite, Apt. #, etc.

22 City & State

23 SARASOTA, FL

Zip

24 34242

Country

25 USA

2a. Mailing Address

21 5122 SANDY BEACH AVE

Suite, Apt. #, etc.

22 City & State

23 SARASOTA, FL

Zip

24 34242

Country

25 USA

3. Date Incorporated or Qualified
08/09/1993

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0432768

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

CALDERON, XAVIER

~~2451 E BURR OAK CT~~
SARASOTA FL ~~34232~~

81 Name

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

5122 SANDY BEACH AVE

83

84 City

FL

85 Zip Code

34242

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and date of filing

(Date Required Agent Signature Required when Filing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME CALDERON, XAVIER

STREET ADDRESS ~~2451 E BURR OAK CT~~

CITY - ST - ZIP SARASOTA FL

TITLE VSD ☐ DELETE

NAME CALDERON, WANDA I

STREET ADDRESS ~~2451 E BURR OAK CT~~

CITY - ST - ZIP SARASOTA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

5122 SANDY BEACH AVE.

34242

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

5122 SANDY BEACH AVE.

34242

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96

941-346-3001

CR2E034 (12/95)