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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	UAL REPORT Secretary of State				
	1996	DIVISIO	N OF CORPORATIONS		
DOCUN 1. Corporation	MENT # P9500	00074190	(6)		
BRIGH	T VENTURES, INC.				
				C BAGGIDA DIA DANDA ANDIA ANGIA ARIK	H A A BAN H A A A A A BAN HA A A A A A A A A A A A A A A A A A
Principal Place of Business Mailing Address					
8740 54TH AVENUE. EAST 8740 54TH BRADENTON FL 34202 BRADENTON					
				Date Incorporated or Qualified	3a. Date of Last Report
				10/01/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address	S	4. FEI Number	Applied For
21		26		65-06/5078	Not Applicable
Suite, Apt. #	₹, etc.	Suite, Apt. #, e	tc.	5. Certificate of Status Desired	S8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Curre	29 ant Registered Agent	[30]	Florida Statutes Yes 10. Name and Address of New R	□ No
	8, mains and readings of contr	Alt Hogistoled Agent	81 Name		agistered Agent
HINES, (CHARLES F ESQ.		82 04	t Address (P.O. Box Number is Not Acceptab	(6)
1001 AVENIDA DEL CIRCO			82 Stree	r Address (F.O. Box Nomber is Not Acceptab	4e)
VENICE	FL 34284		83		
			84 City		85 Zip Code
44 Durament to	the previolent of Castions CO7 OF	00 and 607 1500. Finish (S		
or registere	od agent, or both, in the State of Flo h, and accept the obligations of, Sec	arida. Such change was au	thorized by the cornoration'	corporation submits this statement for the pur s board of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am
	n, and accept the obligations of, Sec	Stion 607.0505, Florida Sta	atutes.		
SIGNATURE _	Signature, typed or printed name of registered age		(NOTE: Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AI	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME	BRIGHT, P. BLAISE	DELETE			☐ Change ☐ Addition
STREET ADDRESS	8740 54TH AVENUE, EAST		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34202		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE		ELIZABETH L BRIEF	HT, Change Addition
NAME			2 2 NAME	ELIZABETH L. BRIGI 8740 54th AVE.E.	DIRECTOR
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CHTY - ST - ZIP	, , , , ,	
TITLE		☐ DELETE			Change Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3. STREET ADDRESS 3.4 City-St-Zip		
TITLE		DELETE			Change: Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Fin no err	4.4 City - St - ZiP		
TITLE		☐ DELETE			Change Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-SI-ZIP			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	}	
TITLE		DELETE			☐ Change ☐ Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. Ido hereby certify that the information supplied with this filing it 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 in hual 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in planced, or on an attachment with an address.

SIGNATURE:

SIGNATURE: 1

OF SIGNING OFFICER OR DIRECTOR

2/38/96 Destine Proce #