09091999-90007-026-$550.00-$550.00

AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 OCT -1 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000045988
Corporation Name
BRIGHTSIDE INVESTMENTS, INC.

9/9/99 90007 026 $550.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
39 GUNN HWY MPA FL 33624	5339 GUNN HWY TAMPA FL 33624

Principal Place of Business 1504 WARMAN CT	2a. Mailing Address 26 P.O. Box 272070
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27
City & State TAMPA FL	City & State 28 TAMPA FL
Zip 33613 Country 25 USA	Zip 29 33688 Country 30 USA

3. Date Incorporated or Qualified: 05/15/1997

4. FEI Number: 59-3448792 ☐ 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 owes the current year Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HICKMAN, LARRY R
5339 GUNN HWY
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name: LAWRENCE POMERANTZ
82 Street Address (P.O. Box Number is Not Acceptable): 1504 WARMAN CT
83
84 City: TAMPA FL 85 Zip Code: 33613

Pursuant to the provisions of sections 607.0502 and 607.1508, 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] LAWRENCE POMERANTZ PRES [signature] DATE: 9/15/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
D HICKMAN, LARRY R 10943 BRIGHTSIDE DR TAMPA FL 33624	☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
D HICKMAN, SUSAN K 10943 BRIGHTSIDE DR TAMPA FL 33624	☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
D POMERANTZ, LARRY 4949 MARBRISA DR TAMPA FL 33624	☐ DELETE	3.1 TITLE PRES 3.2 NAME LAWRENCE POMERANTZ 3.3 STREET ADDRESS 1504 WARMAN CT 3.4 CITY-ST-ZIP TAMPA, FL 33613	☒ Change ☐ Addition
	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (5/99)

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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.

KE

SIGNATURE: SIGNATURE REQUIRED 9/1/99 8139151987
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #