SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Mailir

PROFIT .
CORPORATION
ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V40489

(9)

BRIGHT BEGINNINGS, INC.

FILED

Sep 19 1997 8:00am

Secretary of State

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2990 N.W. 49RD AVENUE Lauderdale Lakes FL 33313			2990 N.W. 43RD AVENUE LAUDERDALE LAKES FL 33313				DO NOT WOLT		20405			
						3.	DO NOT WRITE Date Incorporated or Qualified 06/01/1992	3a. Da	te of Las /14/198			
2. Principal Place of Business 2a. M		2a. Mailing Address	Mailing Address			4.	. FEI Number			Applied For		
21 26							65-0332400	····		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	-			5.	. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State 28		City & State	¬ '			6	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip	Country	Zip	Country			8.	. This corporation owes or has pa	-	_ `			
24	25	[29]					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
БАІ	Name and Address of Co PTISTE, AFUA	urrent Hegistered Agent		81	Name	10	, Name and Address of New He	gistered .	Agent			
	1816, AFUA 181 N.W. 14TH STREET			ا"	Name							
	ANTATION FL 33323			82	Street A	ddress (P.O, Box Number is Not Acceptal	ole)				
			1	83								
				84	City			FL	85 Z	ip Code		
11. Pursuant	to the provisions of Sections 607	0502 and 607.1508, Florida Statu State of Florida. Such change was obligations of, Section 607.0505, F	ites, the ab	ove	-named c	orporation's	on submits this statement for the p	ourpose of	changin	g its registered		
agent. I a	m familiar with, and accept the	obligations of, Section 607.0505, F	forida Stati	utos		JI BUUT S	board of directors. Thereby acce	hr ine whh	Olivinoni	as registered		
SIGNATURE												
	Signature, typed or printed name of register		1F: Registered	Ager	nt signature ti			DATE	DIDEOT	2000 11.42		
12.	PD	S AND DIRECTORS DELETE	13.				ADDITIONS/CHANGES TO OFFIC	JERS ANL	DIRECT			
TITLE	BAPTISTE, AFUA		1.1 TIT 1.2 NA		- 1				L. Citalit	Je		
NAME STREET ADDRESS	12361 N.W. 14TH STREE	Ť			ADDRESS							
	PLANTATION FL		1.4 CIT									
CITY-ST-ZIP TITLE		DELETE	2.1 TIT		1-211			·····	Chang	pe Addition		
NAME	BAPTISTE, CURTIS	OTE CLIDTIC		2.2 NAME								
STREET ADDRESS	12361 N.W. 14TH STREET			2.3 STREET ADDRESS						ļ		
CITY-ST-ZIP	PLANTATION FL			2. 4 CITY-ST-ZIP								
TITLE		☐ DELETE	3.1 717		-				☐ Chang	ge Addition		
NAME			3.2 NA	ME								
STREET ADDRESS			3.3 ST	RÉET	ADDRESS							
CITY-ST-ZIP			3.4. CI	TY-S	T-ZIP							
TITLE		DELETE	4.1 T(T	LE					☐ Chang	ge Addition		
NAME			4. 2 N/	ME								
STREET ADDRESS			4.3 ST	REET	ADDRESS							
CITY-ST-ZIP			4.4 CIT	Y-SI	I - ZIP							
TITLE		DELETE	5.1 T(T	LE			· · · · · · · · · · · · · · · · · · ·	•	Chang	ge		
NAME			5.2 NA	ME						ļ		
STREET ADDRESS			5.3 STI	REET	ADDRESS					•		
CITY-ST-ZIP		[7] Ap	5.4 CIT		r- ZIP		······································					
TITLE		DELETE	6.1 111						Chang	ge [Addition		
NAME			6.2 NA									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP			6.4 CIT	Y-ST			and a 140 07/01/0 Final Park to	- (6)		- 141-		

4. I do 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 atlachment with an address.

01/0/67