

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 22, 2005 8:00 am**  
**Secretary of State**

07-22-2005 90022 015 \*\*\*150.00

**DOCUMENT # G36459**

1. Entity Name  
**BREEZE HAVEN APARTMENTS, INC.**



Principal Place of Business  
**920 SE SECOND AVE  
HALLANDALE, FL 33009-7136**

Mailing Address  
**2170-D HAVERHILL RD SOUTH  
WEST PALM BCH., FL 33415 US**

**DO NOT WRITE IN THIS SPACE**



07072005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**13-3176798**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BOWE, BARBARA L.  
2130A HAVERHILL RD SOUTH  
WEST PALM BCH, FL 33415**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUONANNO, VINCENT 3605 S OCEAN BLVD PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIEBOWITZ, EDYTHE CLARIDGE HOUSE II APT 4CW VERONA, NJ 07044
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIBBY, WILLIAM 385 HILLCREST ROAD FLEMINGTON, NJ 08822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUONANNO, VINCENT, DR. 6 KENILWORTH TERR GREENWICH, CT 06803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *V. Buonanno*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*V. Buonanno*  
President

*7/14/05*  
Date

*561-969-7541*  
Daytime Phone #

ATTACHMENT

50057130

**BREEZEHAVEN APTS., INC.**  
**2170D HAVERHILL ROAD SOUTH**  
**WEST PALM BEACH, FL 33415**  
**JULY 17TH, 2005**

**DIVISION OF CORPORATIONS**  
**P.O. BOX 6198**  
**TALLAHASSEE, FL 32314-6198**


**RE: 2005 ANNUAL REPORT**  
**DOC. #G36459**  
**TO WHOM IT MAY CONCERN:**

**ENCLOSED PLEASE FIND ANNUAL REPORT FOR THE**  
**ABOVE-NAMED CORPORATION AND CHECK FOR**  
**\$150.00.**

**I DON'T BELIEVE I EVER RECEIVED YOUR FIRST**  
**NOTICE AND AM ASKING FOR YOUR KIND**  
**CONSIDERATION IN WAIVING THE LATE FEE.**

**IN THE FUTURE I WILL BE MORE AWARE OF TIME**  
**TIME LINE FOR FILING.**

**THANKING YOU IN ADVANCE.**

**YOURS TRULY,**  
  
**V. BUONANNO, PRESIDENT**  
**ENC: ANNUAL REPORT & CHECK**