FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J42412

Corporation Name

EASY BREATHING, INC.

(3)

FILED May 21 1998 8:00am Secretary of State



							OFFICE PRODUCTION			
Principal Place of Business Mailing Address						1,001,100				
\$111 STERLII	1921 N 36 AVE									
	ALE FL 33312	HOLLYWOOD FL 33021			DO NOT WOITE IN THE COACE					
US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
						11/10/19				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Ar	oplied For	
21		26			59-2751	313			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.				5. Certificate of	Status Desired			Additional
22		27							equired	
City & State	0	City & State			6. Election Cam		-		May Be	
23		Z _i p Country			Trust Fund C				to Fees	
Zip	Country	Zip	h,	nuy			ion owes or has p			
24	25	29	30			·	perty Tax due Jun ddress of New R			_l No
- N	9. Name and Address of Curren	it Hegistered Agent		B1	Name	10. Name and A	daress of New h	egistered	Myoni	
	IBENSTEIN, ROBERT		I							
	11 STIRLING RD			62	Street #	Address (P.O. Box Number is Not Acceptable)				
FI	LAUDERDALE FL 33312			63						
				64	City				85 Zip	Code
			1					FL		
11. 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										
				J Age	nt signature	quired when reinstating)	HANGES TO OFFI	DATE CEDS AND	DIRECTOR	2C IN 12
12.	OFFICERS AND DIRECTORS DELETE			13.		ADDITIONS/CI	HANGES TO OFFI	CERS AINL	Change	Addition
	RUBINSTEIN, RICHARD	□ otre ir							L Villange	L Addition
NAME	4004 N 00 AVE			1.2 NAME						
STREET ADDRESS	HOLLMHOOD EL		1	1.3 STREET ADDRESS 1.4 City-St-Zip						
CITY-ST-ZIP	TIOLETTIOOD TE	DELETE			1-ZIP				Change	Addition
TITLE				21 TITLE						Addition
NAME				2.2 NAME 2.3 STREET ADDRESS						1
STREET ADDRESS					ŀ					
CITY-ST-ZIP		DELETE			ST - ZIP				Change	Addition
TITLE		☐ 0E1E1E	31111						ட பலமு	☐ Voquion
NAME				3.2 NAME						
STREET ADDRESS			•	3.3 STREET ADDRESS						
CITY-ST-ZIP					ST-ZIP				Change	☐ Addition
TITLE				4.1 TITLE					L. Change	☐ vocition
NAME			4. 2 N							
STREET ADDRESS			4.3 STREET		ł					
CITY-ST-ZIP		T 52, 222	4.4 CITY-5		T-ZIP					4490
TITLE		☐ DELETE	5.1 TITLE		ļ				Change	☐ Addition
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 ST	AEFT	ADDRESS					
CITY-ST-ZIP			5.4 CITY - S		T-ZIP				·	
TITLE		☐ DELETE	6.1 Til	Lŧ	T				Change	☐ Addition
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET	ADDRESS					
CITY-ST-ZIP			6.4 CI	TY-S	I-ZIP				i.	

14. 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.

Ul. alan (201) 962 345