## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000007489

Entity Name: BREAK-AWAE' KRU INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7500 HABOUR BLVD MIRAMAR, FL 33023

Current Mailing Address: New Mailing Address:

7500 HABOUR BLVD MIRAMAR, FL 33023

FEI Number: 76-0744920 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHARLES, VICTOR K
5861 N.W. 16TH PLACE, #304
SUNRISE, FL 33313 US

CHARLES, VICTOR K
5861 N.W. 16TH PLACE
SUITE 304
SUNRISE, FL 33313 US

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.

SIGNATURE: 04/30/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ( ) Delete Title: PRES (X) Change ( ) Addition

Jame: BYER. GARFIELD Name: BYER. GARFIELD

 Name:
 BYER, GARFIELD
 Name:
 BYER, GARFIELD

 Address:
 7500 HABOUR BLVD.
 Address:
 7500 HABOUR BLVD.

 City-St-Zip:
 MIRAMAR, FL 33023
 City-St-Zip:
 MIRAMAR, FL 33023

Title: PRO ( ) Delete Title: V.P (X) Change ( ) Addition

 Name:
 GIBBS, RHONDA
 Name:
 VICTOR, CHARLES

 Address:
 1260 N.W. 179TH TERRACE
 Address:
 5861 NW 16TH PLACE

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 SUNRISE, FL 33313

Title: TRU ( ) Delete Title: TRU (X) Change ( ) Addition Name: CHARLES, COLEEN Name: CHARLES, COLEEN B

Address: 5861 N.W. 16TH PLACE, #304 Address: 5861 N.W. 16TH PLACE, #304

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

 Title:
 S
 ( ) Delete
 Title:
 SEC
 (X) Change ( ) Addition

 Name:
 BOBB-BYER, NESTER
 Name:
 BOBB-BYER, NESTER

 Address:
 7500 HABOUR BLVD
 Address:
 7500 HABOUR BLVD

 Address:
 7500 HABOUR BLVD
 Address:
 7500 HABOUR BLVD

 City-St-Zip:
 MIRAMAR, FL 33023
 City-St-Zip:
 MIRAMAR, FL 33023

 $\label{eq:title:proposed} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{( ) Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{PRO} \qquad \mbox{(X) Change ( ) Addition}$ 

Name: CHARLES, VICTOR Name: GIBBS, RHONDA

Address: 5861 N.W. 16TH PLACE, #304 Address: 1260 N.W. 179TH TERRACE

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR K. CHARLES VP 04/30/2006