

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007489

FILED  
May 07, 2012  
Secretary of State

Entity Name: BREAK-AWAE' KRU INC.

**Current Principal Place of Business:**

7500 HABOUR BLVD  
MIRAMAR, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

5861 NW 16TH PLACE  
304  
SUNRISE, FL 33313

**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 (X)

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

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

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BYER, GARFIELD S  
Address: 7500 HABOUR BLVD.  
City-St-Zip: MIRAMAR, FL 33023

Title: V.P  
Name: VICTOR, CHARLES K  
Address: 5861 NW 16TH PLACE, UNIT 304  
City-St-Zip: SUNRISE, FL 33313

Title: TREA  
Name: CHARLES, COLEEN B  
Address: 5861 N.W. 16TH PLACE, UNIT 304  
City-St-Zip: SUNRISE, FL 33313

Title: SEC  
Name: BOBB-BYER, NESTER A  
Address: 7500 HABOUR BLVD  
City-St-Zip: MIRAMAR, FL 33023

Title: PRO  
Name: GIBBS, RHONDA E  
Address: 9790 W. DAFFODIL LANE  
City-St-Zip: MIRAMAR, FL 33025

I hereby 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 all other like empowered.

SIGNATURE: VC

V.P

05/07/2012

Electronic Signature of Signing Officer or Director

Date