

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129747

Entity Name: BREEZY'S BEADS, INC.

FILED
Mar 22, 2004
Secretary of State

Current Principal Place of Business:

216 OAKFIELD DRIVE
BRANDON, FL 33511

New Principal Place of Business:

216 OAKFIELD DRIVE
BRANDON, FL 33511 US

Current Mailing Address:

12211 SHADY FOREST DRIVE
RIVERVIEW, FL 33569

New Mailing Address:

12211 SHADY FOREST DRIVE
RIVERVIEW, FL 33569 US

FEI Number: 01-0758646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TICE, KIM
12211 SHADY FOREST DRIVE
RIVERVIEW, FL 33569

Name and Address of New Registered Agent:

TICE, KIM
12211 SHADY FOREST DRIVE
RIVERVIEW, FL 33569 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:

03/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TICE, KIM D
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VP () Delete
Name: TICE, LESLIE T JR
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569

Title: S () Delete
Name: TICE, LESLIE T JR
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569

Title: T () Delete
Name: TICE, KIM D
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TICE, KIM O
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569 US

Title: VP (X) Change () Addition
Name: TICE, LESLIE T JR
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: TICE, KIM O
Address: 12211 SHADY FOREST DR
City-St-Zip: RIVERVIEW, FL 33569 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM O. TICE

P

03/22/2004

Electronic Signature of Signing Officer or Director

Date