

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129747

Entity Name: BREEZY'S BEADS, INC.

FILED  
Jun 30, 2005  
Secretary of State

## Current Principal Place of Business:

216 OAKFIELD DRIVE  
BRANDON, FL 33511 US

## New Principal Place of Business:

226 OAKFIELD DRIVE  
BRANDON, FL 33511 US

## Current Mailing Address:

12211 SHADY FOREST DRIVE  
RIVERVIEW, FL 33569 US

## New Mailing Address:

226 OAKFIELD DRIVE  
BRANDON, FL 33511 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 US

## Name and Address of New Registered Agent:

TICE, KIM O  
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: KIM O. TICE

06/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

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

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

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 O  
Address: 12211 SHADY FOREST DR  
City-St-Zip: RIVERVIEW, FL 33569 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

PRES

06/30/2005

Electronic Signature of Signing Officer or Director

Date