

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014008

Entity Name: BREATHER BUDDY INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

5022 31ST AVENUE SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

5022 31ST AVENUE SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 61-1464764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GML LOGISTICS INC.
11 42ND STREET NORTH,
SUITE 102
ST. PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

GML LOGISTICS INC.
3734 131ST AVE NORTH
SUITE 12
CLEARWATER, FL 33762 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BALOGH, JOHN
Address: 5301 31ST AVE. SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: VP () Delete
Name: GILCHRIST, GAIL D
Address: 5022 31ST AVE. SOUTH
City-St-Zip: GULFPORT, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GAIL D. GILCHRIST

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date