

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000027793

FILED  
Apr 26, 2005  
Secretary of State

**Entity Name:** BETTER LIVING ENTERPRISES, INC.

**Current Principal Place of Business:**

228 NW 69TH STREET  
BOCA RATON, FL 33487

**New Principal Place of Business:**

8663 TIERRA LAGO COVE  
LAKE WORTH, FL 33467

**Current Mailing Address:**

228 NW 69TH STREET  
BOCA RATON, FL 33487

**New Mailing Address:**

8663 TIERRA LAGO COVE  
LAKE WORTH, FL 33467

**FEI Number:** 20-1389375

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURCHIE, GERALD R  
228 NW 69TH STREET  
BOCA RATON, FL 33487 US

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

NAVARETTA, STEVEN ESQ  
1100 SW ST. LUCIE WEST BOULEVARD  
PORT ST. LUCIE, FL 34986 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:** STEPHEN NAVARETTA

04/26/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: MURCHIE, GERALD R  
Address: 228 NW 69TH STREET  
City-St-Zip: BOCA RATON, FL 33487

Title: VD (X) Delete  
Name: BERGELSON, VICTOR  
Address: 228 NW 69TH STREET  
City-St-Zip: BOCA RATON, FL 33487

**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:** GERALD MURCHIE

PSD

04/26/2005

Electronic Signature of Signing Officer or Director

Date