


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 15, 2005 8:00 am**  
**Secretary of State**

08-15-2005 90079 022 \*\*\*150.00

<b>DOCUMENT # P04000118295</b>	
1. Entity Name <b>HEALTHY ADVENTURE, INC.</b>	

Principal Place of Business <b>14155 US HWY 1 SUITE 200 JUNO BEACH, FL 33408</b>	Mailing Address <b>14155 US HWY 1 SUITE 200 JUNO BEACH, FL 33408</b>
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**50061529**



2. Principal Place of Business <b>13700 US Highway One</b>	3. Mailing Address <b>13700 US Highway One</b>
Suite, Apt. #, etc. <b>SUITE # 202-A</b>	Suite, Apt. #, etc. <b>SUITE # 202-A</b>
City & State <b>JUNO BEACH, FL</b>	City & State <b>JUNO BEACH, FL</b>
Zip <b>33408</b>	Country <b>PALESTINE</b>

08092005 Chg-P CR2E034 (10/03)

4. FEI Number <b>73-1715045</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>ZAYES, ERIC L 755 SEAVIEW DRIVE JUNO BEACH, FL 33408</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: **Eric L. Zayes** DATE: **8/9/05**

(NOTE: Registered Agent signature required when re-registering)

<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO CONNOLLY, BRIAN M 14155 US HWY 1 SUITE 200 JUNO BEACH, FL 33408</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P ZAYES, ERIC L 14155 US HWY 1 SUITE 200 JUNO BEACH, FL 33408</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P ZAYES, ERIC L 13700 US Highway One #202-A JUNO BEACH, FL 33408</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Eric L. Zayes** DATE: **8/9/05** DAYTIME PHONE: **561-626-3293**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT  
50061529  
#04000118295-

August 9<sup>th</sup>, 2005

To whom it may concern:

I wanted to take a few moments and let you know that I sat down with my accountant, Sylvia Campbell, in Palm Beach Gardens, FL the other day. During our conversation she asked me if I filed my annual report. With a blank stare, I said to who? Sylvia then went on to explain that every year, I must file my annual report with the State of Florida, the cost is \$150. I informed her that I had never received any information about an annual report. She says this happens periodically, and as your accountant, I will make sure you are aware of this every year moving forward, with or without any notice in the mail.

I have attached a check for \$150/ per S-Corp. Please understand this was a simple mistake. As a first time business owner I am learning as I go.

Thank you again....

Best regards,

  
Eric L. Zayes  
Healthy Adventure, Inc.  
Healthful Communications, Inc.