2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000009580

Entity Name: BREEZEWORKS MEDIA COMPANY

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

36263 US HWY 19N 2969 SPRING OAK AVE PALM HARBOR, FL 34684 PALM HARBOR, FL 34684

Current Mailing Address: New Mailing Address:

P.O. BOX 15904 CLEARWATER, FL 33766

FEI Number: 20-2198889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHARLES, CONSTANTINE
36263 US HWY 19N
PALM HARBOR, FL 34684 US
CHARLES, CONSTANTINE
2969 SPRING OAK AVE
PALM HARBOR, FL 34684 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: CONSTANTINE CHARLES 03/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CHARLES, CONSTANTINE CHARLES, CONSTANTINE Name: Name: 36263 US HWY 19N 2969 SPRING OAK AVE Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684

Title: TRSR () Delete Title: TRSR (X) Change () Addition Name: CHARLES, CONSTANTINE Name: CHARLES, CONSTANTINE

Name:CHARLES, CONSTANTINEName:CHARLES, CONSTANTINEAddress:36263 US HWY 19NAddress:2969 SPRING OAK AVECity-St-Zip:PALM HARBOR, FL 34684City-St-Zip:PALM HARBOR, FL 34684

Title: SECR () Delete Title: SECR (X) Change () Addition Name: CHARLES, CONSTANTINE Name: CHARLES, CONSTANTINE

 Name:
 CHARLES, CONSTANTINE
 Name:
 CHARLES, CONSTANTINE

 Address:
 36263 US HWY 19N
 Address:
 2969 SPRING OAK AVE

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:
 PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CONSTANTINE CHARLES PRES 03/28/2006