2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000080602

1. Entity Name

BREZZA TROPICWEAR, INC.



FILED Mar 21, 2008 08:00 Al Secretary of State

Principal Place of Business

7458 SW 48 ST. MIAMI, FL 33155 Mailing Address

413 INTERAMERICA BLVD. WH-1 PMB MX018-169 LAREDO, TX 78045



DO NOT WRITE IN THIS SPACE				01182008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable				
Name and Address of Current Registered Agent								
LOPEZ-AGULAR, HENRY A ESQ 9415 SUNSET DRIVE SUITE 111-A MIAMI, FL 33173			DO NOT WRITE IN THIS SPACE					
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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS			I		- , , , , , , , , , , , , , , , , , , ,			
TITLE P NAME NAVARRO, DAISY T STREET ADDRESS CHY-ST-ZIP MIAMI, FL 33155				U00000865636 04/07/08-80036-018 150.00				
TITLE VS NAVARRO, STREET ADDRESS 7458 SW 48 CITY-ST-ZIP MIAMI, FL 3	· - ·			•				
TITLE NAME STREET ADDRESS CITY-S1-2IP					NOT W			
TITLE NAME STREET ADDRESS				IN ³	THIS SP	ACE		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 actives:

SIGNATURE:

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

THE DESIGNED MANE OF EXCHING DEPOSE OF DIRECTOR

3/18/08 4441303