

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000094452

FILED
Jan 23, 2009
Secretary of State

Entity Name: GULF BREEZE ENTERPRISES, INC.

Current Principal Place of Business:

19239 N. DALE MABRY HWY., #115
LUTZ, FL 335485068

New Principal Place of Business:

Current Mailing Address:

19239 N. DALE MABRY HWY., #115
LUTZ, FL 335485068

New Mailing Address:

FEI Number: 32-0266102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROCK, STEVE
19239 N. DALE MABRY HWY., #115
LUTZ, FL 335485068 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROCK, STEVE
Address: 19239 N. DALE MABRY HWY., #115
City-St-Zip: LUTZ, FL 335485068

Title: D () Delete
Name: BROCK, ERIKA
Address: 19239 N. DALE MABRY HWY., #115
City-St-Zip: LUTZ, FL 335485068

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 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: STEVE BROCK

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01/23/2009

Electronic Signature of Signing Officer or Director

Date