PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPAFTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000016430

	BREATH INTERNATIONAL.						
Principal Place		Mailing Address 737 HWY 98 EAST: #4					
737 HWY 98 EAST: #4 737 HWY 98 EAST: #4 DESTIN FL 32541 DESTIN FL 32541				1			
US	- <u>-</u> -	_US	_	DO NOT WRITE IN	THIS SPACE		
				3. Date In-xorporated or Qualifed 03/01/1994			
2. Principal Pl	face of Business	2a. Mailing Address		4. FEI Number	<u> </u>	oled For	
21		26		65-0550153		t.\pplicable	
Suite, Art.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A		
City & State	9	City & State		6. Election Campaign Financing	\$5.00	- , ,	
23		28		Trust F and Contribution	.Added t	o Fees	
Zip	Coun ry	Zip	Country	8. This corporation owes the current ye		[]No	
24	25	29	30	Person al Property Tax.		LINO	
<u> </u>	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Regist	rate 1 v Aetir		
nsw	ALT, GREGORY S		Char	la Denise Carr dress (P.O. Box Number is Not Acceptable)			
	HWY 98 EAST; #4		82 Street Ad	dress (P.O. Box Number is Not Acceptable)			
	TIN FL 32541		B3 / J	lighway 98 East;			
}			Suite	· #4			
1			84 City		F1 85 Zip C	ixde (
44 5	and the second land of Stations 607.05	502 and 607 1508 Florida Statu	Dest	reporation submits this statement for the purportion's board of a irrestors. I hereby accept the	ose of changing its	ragistered	
Office (r r	registered agent, or both, in the Stating familiar with, and accept the oblig	e of Florida. Such change was a gations of, Section 607.0505, Fl	nuthorized by the corporatorida Statutes.	rporation submits this statement for the purportion's board of cirectors. I hereby accept the	appointment as req	gstered	
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SIGNATUFE	Signature, typed or printed na ne of registered of	gent and title if applicable. (NOT	E Registered Agent signature requ		TE .	FLS IN 12	100/
1	Signature, typed or printed na ne of registered of		Registered Agent signature regi	red when reinstating) DA	TE .		(11/00)
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.C7(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementa annual 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 it execute this report as required by Chap er 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if change d, or on-an attachment with a floridations.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

4/20/99

FILED

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90055 039 ***150.00