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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000062055 (6)

FRESH BREATH INTERNATIONAL, INC.

FILED Jan 15 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 444 BRICKELL AVE. 444 BRICKELL AV SUITE 48 SUITE 48 MIAMI FL 33131 MIAMI FL 33131-					- I TOOKKOO KIA KAKA BOKK BOKK BOKK BOKK BOKK BOKK BIKA BIKA BIKA BIKA BIKA BIKA BIKA BI			
					 Date Incorporated or Qualifie 08/23/1994 	ied 3a. Date of Last Report 02/19/1996		
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26				Not Applicable		
Suite, Apt 22		Suite, Apt #, etc.	27		5. Certificate of Status Desired		Fee Hequired	
City & Sta	etc.	City & State		6. Election Campaign Financing	9 \$5.00 May Be Added to Fees			
23 Zip	Country	28 Zip	Countr		Trust Fund Contribution			
24	k		30	,	8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes			
	9. Name and Address of Curren		1301	· · · · · · · · · · · · · · · · · ·	10. Name and Address of New			
PEI	RUYERA, SUSANA		8	Name				
	BRICKELL AVE.		82	Street Add	ress (P.O. Box Number is Not Accep	table)	,	
_	ITE 48 AMI FL 33131		8			· · · · · · · · · · · · · · · · · · ·	, <u></u>	
mu								
			84	City		FL	85 Zır	p Code
SIGNATURE	Stgramo, typed or je i bisratre of o ja, tendiaja OFFICE RS AN	D DIRECTORS	13.	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OF			
TITLE NAME	TSCHIRHART, BRIAN A	DELÉTE	1.1 TITLE				Change	Addition
STREET ADDRESS	AAA DDIOVELL AVE AAG			T ADDRESS				
CHTY - S1 - ZiP	MIAMI FL 33131		1.4 C(TY)	Ϋ́				
THIL!	D	DELETE	2.1 TITLE	· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAMÉ	RUIZ, JACQUELINE F		2.2 NAME					
STREET ADDRESS			2 3 STREE	T ADDRESS				
CITY-ST-7/P	MIAMI FL 33131		2 4 CITY	ST-ZIP				
TITLE	D Peruyera, Susana	[] DELETE	3.1 TITLE				Change	e [] Addition
NAME	AAA DOLOVELL AVE AAA		3.2 NAME	Laborer				
STREET ADORESS	MIAMI FL 33131			I ADDRESS				
CITY+S1+ZIP TITLE		DELETE	3.4. CHTY 4.1 THILE	31 · IIF			Change	e Addition
NAMÉ		المادية فيهيا	4.2 NAM					heard / total DII
STREET ADDRESS				T ADDRESS				
CITY - ST - ZIP			4.4 CHY-					
DILE		DELETE	5 1 TITLE			***************************************	Change	e Addition
NAM!			5.2 NAME					
STREET ADORESS	<u>;</u>		5.3 STREE	T ADDRESS				
CITY+ST-2IP	<u> </u>		5.4 CITY -	ST-ZIP				
THUE		DELETE	61 TITLE	""			☐ Change	e Addition
NAME			6.2 NAME					
STREET ADDRESS	,		1	1 ADDRESS			•	
C-TY - ST - Z-P	<u></u>		6.4 CITY	ST - ZIP				

14. I do hereby certify that the information subsched with this fung does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 frustone empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or on an attantion and address.

SIGNATURE:

SUSCINATURE AND TYPED OR PRINTLED NAME OF SIGNING OF THE OR DIRECTOR