## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000079209

Entity Name: BREEZES COASTAL CAFE, INC

FILED May 14, 2005 Secretary of State

Littly Na	IIIE. DREEZER	COASTAL CALL, INC.				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
304 SOUTH ALCANIZ STREET PENSACOLA, FL 32501				304 SOUTH ALCANIZ STREET PENSACOLA, FL 32502		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
304 SOUTH ALCANIZ STREET PENSACOLA, FL 32501				304 SOUTH ALCANIZ STREET PENSACOLA, FL 32502		
FEI Number	: 59-3340727	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	l Address	of New Registered Agent:	
	OBERT T TH ALCANIZ ST DLA, FL 32501	REET US				
	named entity s e of Florida.	submits this statement for the	purpose of changing	its register	ed office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
		3(2)(b), F.S., the corporation did n Trust Fund Contribution ( ).	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () RUSSO, EMILIO 304 A ALCANIZ PENSACOLA, F	ST	Title: Name: Address: City-St-Zip:	PD RUSSO, E 6175 ALIO PENSACO		
Title: Name: Address: City-St-Zip:	VD () RUSSO, SEBAS 6182 ALICIA DF PENSACOLA, F	RIVE	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition RUSSO, SEBASTIANO 6051 SONGBIRD DR PENSACOLA, FL 32503		
Title: Name: Address: City-St-Zip:	STD () RUSSO, MARIC 6182 ALICIA DE PENSACOLA, F	RIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () SOREL, ROBER 304 S ALCANIZ PENSACOLA, F	ST	Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SEBASTIANO RUSSO VD 05/14/2005