

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008909

Entity Name: ALASKA BREEZE, CORP.

FILED
Jun 28, 2004
Secretary of State

Current Principal Place of Business:

470 ANSIN BLVD., BAY G
HALLANDALE BEACH, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

470 ANSIN BLVD., BAY G
HALLANDALE BEACH, FL 33009 FL

New Mailing Address:

FEI Number: 65-0809828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EGOZI, MOISES D
470 ANSIN BLVD., BAY G
HALLANDALE BEACH, FL 33009 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: PD () Delete
Name: EGOZI, MOISES D
Address: 6530 GRIFFIN ROAD
City-St-Zip: DAVIE, FL 33314

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EGOZI, MOISES D
Address: 470 ANSIN BLVD BAY G
City-St-Zip: HALLANDALE, FL 33009 US

Title: S () Change (X) Addition
Name: DIAZ, ANGEL M
Address: 470 ANSIN BLVD BAY G
City-St-Zip: HALLANDALE,, FL 33009 US

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: MOISES D. EGOZI

P

06/28/2004

Electronic Signature of Signing Officer or Director

Date