


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000070136	
1. Entity Name BREAKTHROUGH RECOVERY SERVICES, INC.	

Principal Place of Business 202 NW 5TH AVENUE OKEECHOBEE, FL 34972-4140	Mailing Address 202 NW 5TH AVENUE OKEECHOBEE, FL 34972-4140
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DO NOT WRITE IN THIS SPACE

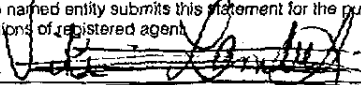


03022006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0876566	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LAMBERTI, ENRICO 2494 SW 22ND CIR. EAST OKEECHOBEE, FL 34974
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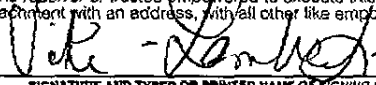
6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: 	(NOTE: Registered Agent signature required when reinstating)	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMBERTI, ENRICO 2494 SW 22ND CIR. E OKEECHOBEE, FL 34974
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LAMBERTI, VIKI 2494 SW 22ND CIR. EAST OKEECHOBEE, FL 34974
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000000464368
03/21/06-80113-008 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	3/12/06 863-467-2300 Date Daytime Phone #