

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000002790

Entity Name: BREATH-EZZZ, INC.

FILED  
Sep 29, 2005  
Secretary of State

## Current Principal Place of Business:

277 AZALEA DR  
UNIT D  
DESTIN, FL 32541

## New Principal Place of Business:

2402 BYERS CT  
NAVARRE, FL 32566

## Current Mailing Address:

P.O. BOX 844  
MARY ESTHER, FL 325690844

## New Mailing Address:

FEI Number: 59-3555443      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURNER, LAFAYETTE  
277 AZALEA DR  
UNIT D  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

LEWIS, WILLIAM L  
2402 BYERS CT  
NAVARRE FL, FL 32566      US

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: WILLIAM L. LEWIS

09/29/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEWIS, WILLIE JR  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: V ( ) Delete  
Name: TURNER, LAFAYETTE  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: ST ( ) Delete  
Name: CUNNINGHAM, LORI  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: C ( ) Delete  
Name: MADDOX, DEVON  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: C ( ) Delete  
Name: BENJAMIN, GABRIEL  
Address: PO BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEWIS, WILLIAM L  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: C (X) Change ( ) Addition  
Name: ANDERSON, TANANA W  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: C (X) Change ( ) Addition  
Name: NELSON, KEITH  
Address: P.O. BOX 844  
City-St-Zip: MARY ESTHER, FL 325690844

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: C ( ) Change (X) Addition  
Name: ANDERSON, THOMAS  
Address: P.O. BOX 244  
City-St-Zip: MARYESTHER, FL 325690844

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: LORI CONNINGHAM

ST

09/29/2005

Electronic Signature of Signing Officer or Director

Date