


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000085436 1. Entity Name BREITHAUP ENTERPRISES, INC.	
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Principal Place of Business 19 W CHERYL DR PHOENIX, AZ 85021	Mailing Address 19 W CHERYL DR PHOENIX, AZ 85021
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DO NOT WRITE IN THIS SPACE



08242006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3600366	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LAURIA, RONALD G 620 CRANES WAY, SUITE 207 ALTAMONTE SPRINGS, FL 32701
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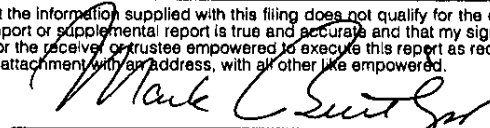
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	U000000576194 09/05/06-80012-022 150.00 DATE
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FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BREITHAUP, MARK 19 W CHERYL DR PHOENIX, AZ 85021
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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:  MARK BREITHAUP <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	8-30-06 602-870-3060 <small>Date Daytime Phone #</small>