

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154547

Entity Name: BREAKOUTSYSTEMSPECIALISTS INC

Current Principal Place of Business:

10704 NW 53RD STREET
SUNRISE, FL 33351

Current Mailing Address:

PO BOX 970698
COCONUT CREEK, FL 33097

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEYER, LESLIE
10704 NW 53RD STREET
SUNRISE, FL 33351 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	ROTHBLATT, JUSTIN	Name	SELESKY, JASON
Address	10704 NW 53RD STREET	Address	10704 NW 53RD STREET
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351

I hereby 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 all other like empowered.

SIGNATURE: JUSTIN ROTHBLATT

PRESIDENT

01/11/2017

Electronic Signature of Signing Officer/Director Detail

Date