

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000006407

**Entity Name:** BREAKOUT VACATIONS, INC

**Current Principal Place of Business:**

14 WALNUT AVE  
SHALIMAR, FL 32579

**Current Mailing Address:**

14 WALNUT AVE  
SHALIMAR, FL 32579 US

**FEI Number:** 47-2931311

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ALLEN, CHAMAINE JACOBY  
14 WALNUT AVE  
SHALIMAR, FL 32579 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:** CHAMAINE JACOBY ALLEN

04/30/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name ALLEN, CHAMAINE A  
Address 14 WALNUT AVE  
City-State-Zip: SHALIMAR FL 32579

Title D  
Name KING, RACHEL L  
Address 629 SANDALWOOD DR  
City-State-Zip: DESTIN FL 32541

*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:** CHAMAINE JACOBY ALLEN

**DIRECTOR**

04/30/2016

Electronic Signature of Signing Officer/Director Detail

Date