RI SOS Filing Number: 200701110480 Date: 10/05/2007 4:00 PM

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: $50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation			
150731	Customer Focus Breakthroughs Inc.			
3. Street Address Principal Business Office		City	State	Zip
104 GOLDMINE RD		GLOCESTER	R I	02814
4. Business Phone No.	5. State of Incorporation			
877- 289- 8205	RHODE ISLAND			

6. Brief Description of the Character of Business Conducted in Rhode Island
CORPORATE TRAINING AND EDUCATION

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
PAUL LEVESQUE			SANDRA LEVESQUE		
Street Address			Street Address		
7081 N Marks, Suite 104 Box 310			SAME		
City	State	Zip	City	State	Zip
FRESNO	CA	93711			
Secretary Name			Treasurer Name		
SANDRA LEVESQUE			SANDRA LEVESQUE		
Street Address			Street Address		
7081 N MARKS, SUITE 104 Box 310			SAME		
City	State	Zip	City	State	Zip
FRESNO	CA	93711			

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000	COMM	$0.01 PAR VALUE

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value
600	COMM	$0.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted] [redacted]

150731

FILED

File Date

Check No. OCT 05 2007

By: By 1032

FOR SECRETARY OF STATE USE ONLY

1429-3-150865

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature [redacted] Date 9/18/07

SANDRA LEVESQUE
Print or Type Name

TREASURER
Title

Form 630 Rev. 08:06