

2002 UNIFORM BUSINESS REPORT (UBR)

0092437 AV

DOCUMENT # K76180
 1. Entity Name
PRINCESS HOLDINGS, INC.

FILED
 02 JUL 16 PM 3:54
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



| | |
|--|--|
| Principal Place of Business 4843 W KENNEDY BLVD TAMPA FL 33609 US | Mailing Address 4843 W KENNEDY BLVD TAMPA FL 33609 US |
| 2. Principal Place of Business 8301-9th St. No | 3. Mailing Address 8301-9th St. No |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

DO NOT WRITE IN THIS SPACE

| | | | |
|---|------------------------------|---|--|
| City & State St. Pete, FL | City & State St. Pete, FL | 4. FEI Number 59-2940220 | Applied For <input type="checkbox"/> Not Applicable |
| Zip 33702 | Country Pinellas | Zip 33702 | Country Pinellas |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |

| | |
|--|---|
| FREEMAN, MINNIE 4843 W KENNEDY BLVD TAMPA FL 33609 | Name Minnie Freeman |
| | Street Address (P.O. Box Number is Not Acceptable) 8301-9th St. No |
| | City St. Pete, FL |
| | Zip Code FL 33702 |

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| | | | |
|---|--|---|-----------------------------|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/> | FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|---|--|---|-----------------------------|

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP FREEMAN, MINNIE 17940 GULF BOULEVARD #14A REDINGTON BEACH FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 200006471702--6 -07/17/02--01063--001 ***150.00 ***150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T FREEMAN, LELAND 17940 GULF BOULEVARD #14A REDINGTON BEACH FL <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP TAMARA HUBER 19727 GULF BLVD 108 INDIAN SHORES BCH FL <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP Tamara Freeman <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Sec William Kouich 19727 GULF BLVD #108 Indian Shores, FL 33785 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE: *Tamara Freeman* 7/18/07 7275799590

CR2E034 (4/02)

Freeman's Mobil
8301 9th St. N.
St. Petersburg, FL 33702
(727) 579-9590

To Whom it may concern:

Please this is the first statement that I have
for the year.

We changed the address from 4843 W. Kennedy
Tampa, Fl. 33689
in Jan. 02. Because my husband was in
the hospital with cancer. He died on

Feb. 11, 02.

I always pay these when I get them.
Hope you can help. It didn't get forwarded
to me.

Thank

Minnie Freeman
8301 9th St. N.
St. Pete, Fl. 33702