

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000002882 (8)

1. Corporation Name
FREEDOM/LATIN AMERICA, INC.

Principal Place of Business

17666 FITCH
IRVINE CA 92714

Mailing Address

17666 FITCH
IRVINE CA 92614-8022

3. Date Incorporated or Qualified
06/01/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip
92614-6022

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

33-0616804

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

NRAI Services, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

526 East Park Avenue

83

84 City

Tallahassee

FL

85 Zip Code

32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Charles Baclet

Charles Baclet, Vice President

2-21-97

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME ROSSE, JAMES N
STREET ADDRESS 17666 FITCH
CITY-ST-ZIP IRVINE CA

TITLE V ☐ DELETE
NAME BELL, ALAN J
STREET ADDRESS 17666 FITCH
CITY-ST-ZIP IRVINE CA

TITLE V ☐ DELETE
NAME KUYKENDALL, DAVID L
STREET ADDRESS 17666 FITCH
CITY-ST-ZIP IRVINE CA

TITLE S ☐ DELETE
NAME WALLACE, RICHARD A
STREET ADDRESS 17666 FITCH
CITY-ST-ZIP IRVINE CA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Douglas R. Hardie
1.3 STREET ADDRESS 1135 East Van Buren
1.4 CITY-ST-ZIP Brownsville, TX 78251

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Robert C. Hardie
2.3 STREET ADDRESS 1530 Ellis lake Drive
2.4 CITY-ST-ZIP Marysville, CA 95918

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME Timothy C. Hoiles
3.3 STREET ADDRESS 27 Lake Avenue
3.4 CITY-ST-ZIP Colorado Springs, CO 80906

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME R. David Threshie, Jr.
4.3 STREET ADDRESS 625 North Grand Avenue
4.4 CITY-ST-ZIP Santa Ana, CA 92701

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

James N. Rosse

James N. Rosse, President

2/14/97

714/253-2308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

97 FEB 24 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (9/96)