-

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700000735

FREEMARK INVESTMENT MANAGEMENT, INC.

Mailing Address Principal Place of Business 3920 RCA BLVD. STE. 2004 3920 RCA BLVD. STE. 2004 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 02/11/1997 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 65-0692312 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 8. This corporation owes the current year Intangible Personal Property Tax. Zin Country Zip Country □No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 82 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 Zip Code R4 City 85

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	Signature, typed or printed name of registered agent and title if applicable.	HOTE: Registered Agent signature	required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS	13.	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CP □ DELETE	1.1 TITLE	President & Director XI	hange Addition	
NAME	SPINELLO, MARK J	1.2 NAME			
STREET ADDRESS	3920 RCA BLVD. STE. 2004	1.3 STREET ADDRESS	i l		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	1.4 CITY- ST-ZIP			
TILE	☐ DELETE	2.1 TITLE		hange (XAddition	
NAME		22 NAME	Glenn T. Ferris 3920 RCA BIRD Ste 2004		
STREET ADDRESS		2.3 STREET ADDRESS	3920 RCA BIVE SE ROOT		
CITY-ST-ZIP	_	2.4 CITY-ST-ZIP	Paim Beach Gardens. Th. 33410		
TILE	☐ DELETE	3.1 TTLE	True Fresidence	hange X Addition	
NAME		32 NAME	Shashi Mehrotra		
STREET ADDRESS	<u> </u>	3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP	<u> </u>		
TITLE	☐ DELETE	4.1 TITLE	1 300101011	hange MAddition	
NAME ,	•	4.2 NAME	Debra A. Noll		
STREET ADDRESS		4.3 STREET ADDRESS		ı	
CITY-ST-ZIP	·	4.4 CITY+ST-ZIP	4-		
TILE	☐ DELETE	5.1 TITLE		nange Addition	
NAME	· ·	52 NAME	†		
STREET ADDRESS		5.3 STREET ADDRESS			
CATY-ST-ZIP		5.4 CITY- ST-ZIP			
ппь	☐ DELETE		□a	nange Addition	
NAME		8.2 NAME		-	
STREET ADDRESS		6.3 STREET ADDRESS		}	
CITY-ST-ZIP	<u></u>	8.4 CITY-ST-ZIP		(A) a ladama attau	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Floride 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 cett; that I em an officer or director of the corporation or the register or trustee experimental 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 inflamment with the address, with all other like empowered.

SIGNATURE:

·

56/- 694-0//C

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90072 015 ***150.00