## **2002 UNIFORM BUSINESS REPORT (UBR)**

**SIGNATURE:** 

| DOCUMENT # G70636  |  |  |   |  | ,<br>   | Jan 16, 2002 8:00 am<br>Secretary of State                                 |                             |  |  |
|--|--|--|---|--|---|--|-----------------------------|--|--|
| 1. Entity Nan  |  |  |   |  |   |  | _                           |  |  |
| FREELA   | ND ENTE  | RPRISES, INC.  | •   |  |   | 01-16-2002   | 2 90063 0                   | 017 ***15                                  | 50.00  |
| Principal Plac   | ce of Business   | 1  | Mailing Address   |  |   |  |                             |  |  |
| 740 S MILITARY TRAIL 740 S MILITARY TRAIL  |  |  |   | L  |   |  |                             |  |  |
| SUITE D SUITE D  |  |  |   |  |   |  |                             |  |  |
| WEST PALM  | I BCH FL 3341:   | 5  | WEST PALM BCH FL  | 33415  |   |  |                             |  |  |
| 2. Principal P   | Place of Busine  | ess  | 3. Mailing Address  |  |   |  | INAT BIA DIRIA.             |  | -<br>  1881  1181  1181  |
| Suite, Apt. #, etc.  |  |  | Suite, Apt. #, etc.   |  |   | DO NOT WRITE IN THIS SPACE   |                             |  |  |
| City & State   |  |  | City & State  |  | 4. FEI Num  | 59-234524  | 7                           | <u> </u>                                   | oplied For<br>ot Applicable                                    |
| Zip  |  | Country  | Zip   | Country  | 5. Certificat                                       | e of Status Desired  |                             | \$8.75 Add                                 | ditional   |
|  | 6. Name a  | and Address of Current   | L<br>Registered Agent   |  | 7. Name ar  | d Address of New R   |                             |  |  |
| A CONTRACTOR OF THE PARTY OF TH |  |  |   | Name   |   |  |                             |  |  |
| FREELAND, PATRICIA L<br>740 S MILITARY TRAIL   |  |  |   | Street Add   | Street Address (P.O. Box Number is Not Acceptable)  |  |                             |  |  |
| 40   | 74   |  |   | l  |   |  |                             |  |  |
| #D   | ALM DEACH  | EL 22415   |   |  |   |  |                             | _  |  |
| WEST PA  | Signature, typed o   | submits this statement for   |   | DTE: Registered Agent signature r  | equired when reinstating)                           | oth, in the State of Flo   | FL<br>rida.                 | Zip Cod                                    | e  |
| WEST PARTURE SIGNATURE  9. This corporate filing in  | s named entity  Signature, typed o   | submits this statement for   | and title if applicable. (No After May 1, 2                               | its registered office or re  | equired when reinstating)  10. E                    | oth, in the State of Flo<br>lection Campaign Fin<br>rust Fund Contribution | DATE                        | \$5.0                                      | 0 May Be   |
| WEST PASS. The above SIGNATURE.  9. This corporate filling in (See criter.)  | s named entity  Signature, typed o  pration is eligibrequirement ar  ria on back)  | submits this statement for<br>ar printed name of registered agent and<br>pole to satisfy its intangible<br>and elects to do so.  | FILE-NOV After May 1, 2 Make Check Paya                                   | its registered office or re DTE. Registered Agent signature r VIII FEE IS-\$150.00 D002 Fee will be \$550 able to Department of  | equired when reinstating)  10. E                    | lection Campaign Fin   | DATE  anoing                | \$5.0<br>Added                             | <b>0</b> May Be  |
| WEST PARTURE .  SIGNATURE .  9. This corporate filling in (See criterial).  ITLE   | Signature, typed or<br>oration is eligible<br>requirement ar<br>ria on back)   | submits this statement for a printed name of registered agent a pole to satisfy its Intangible and elects to do so.  | FILE NOV After May 1, 2 Make Check Pays                                   | its registered office or re DTE. Registered Agent signature r VIII FEE IS-\$150.00 D002 Fee will be \$550 able to Department of 12. IIILE  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  anoing                | \$5.0<br>Added                             | May Be to Fees   |
| WEST PASSIGNATURE SIGNATURE (SEE criter 1.)  1. ITLE INDEED ADDRESS  | Signature, typed or<br>pration is eligible<br>requirement ar<br>ria on back)  DP FREELANI<br>4194 SEA  | submits this statement for a printed name of registered agent a pole to satisfy its Intangible and elects to do so.  OFFICERS AND I  | FILE-NOV After May 1, 2 Make Check Paya                                   | its registered office or re DTE. Registered Agent signature r VIII FEE IS-\$150.00 D002 Fee will be \$550 able to Department of  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  anoing                | \$5.0<br>Added                             | <b>0</b> May Be  |
| WEST PASSIGNATURE  9. This corporate filling in (See criter)   | Signature, typed or contain is eligible requirement arria on back)  DP FREELANI 4194 SEA   | submits this statement for printed name of registered agent and ple to satisfy its intangible and elects to do so.  OFFICERS AND I   | FILE-NOV After May 1, 2 Make Check Paya                                   | OTE. Registered office or re  OTE. Registered Agent signature r  VIII FEE IS-\$150.00  OO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0<br>Added                             | May Be to Fees   |
| WEST PASSIGNATURE  SIGNATURE  This corporate filing in (See critering)  Tax filing in (See critering)  The AME  THEET ADDRESS  TY-ST-ZIP  TILE  AME  AME  AME  | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA WELLINGT   | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I   | After May 1, 2  Make Check Pays  DIRECTORS                                | DTE: Registered Agent signature r VIII FEE IS-\$150.00: 2002 Fee will be \$550 able to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0 Addec DIRECTOR:                      | O May Be<br>d to Fees<br>S IN 11<br>☐ Addition                 |
| WEST PASSES AND AREST ADDRESS TREET ADDRESS  | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2  Make Check Pays  DIRECTORS                                | DTE: Registered Agent signature r VIII FEE IS-\$150.00: 2002 Fee will be \$550 able to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0 Addec DIRECTOR:                      | O May Be<br>d to Fees<br>S IN 11<br>☐ Addition                 |
| WEST PASSIGNATURE  9. This corporate filling in (See criterian Amelian | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I   | After May 1, 2 Make Check Pays  DIRECTORS  Delete                         | its registered office or re DTE. Registered Agent signature r VIII FEE IS-\$150.00 DOO2 Fee will be \$550 able to Department of  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0 Added DIRECTOR: Change               | May Be if to Fees S IN 11 Addition                             |
| WEST PA  SIGNATURE  9. This corporate filling in (See criterian See Crit | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2  Make Check Pays  DIRECTORS                                | DTE: Registered Agent signature r VIII FEE IS-\$150.00: 2002 Fee will be \$550 able to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0 Addec DIRECTOR:                      | May Be if to Fees S IN 11 Addition                             |
| WEST PA  SIGNATURE  9. This corporate filling in (See criterian See crit | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete                         | its registered office or re  OTE. Registered Agent signature r  VIII FEE IS-\$150.00  ROO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE anding n.              | \$5.0 Added DIRECTOR: Change               | May Be if to Fees S IN 11 Addition                             |
| WEST PA  B. The above  SIGNATURE  9. This corpor  Tax filing I (See criter  1.  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP   | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete  Delete                 | DTE: Registered office or re  DTE: Registered Agent signature r  VIII FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  Ancing  n.   CERS AND | \$5.0 Addec DIRECTOR: Change Change        | O May Be of to Fees S IN 11 Addition Addition                  |
| WEST PA  B. The above  SIGNATURE  9. This corpor  Tax filing i (See criter  1.  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  TREET ADDRESS  ITY-ST-ZIP  TILE   | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete                         | DTE: Registered office or re  DTE: Registered Agent signature re  VIII FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  Ancing  n.   CERS AND | \$5.0 Added DIRECTOR: Change               | O May Be of to Fees S IN 11 Addition Addition                  |
| WEST PA  B. The above  SIGNATURE  9. This corpor  Tax filing I (See criter  1.  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP  ITLE  AME  AME  AME  AME  AME  AME  AME  A   | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete  Delete                 | DTE: Registered office or re  DTE: Registered Agent signature r  VIII FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  Ancing  n.   CERS AND | \$5.0 Addec DIRECTOR: Change Change        | O May Be of to Fees S IN 11 Addition Addition                  |
| WEST PA  B. The above  SIGNATURE  9. This corpor Tax filing I (See criter  1.  ITLE AME TREET ADDRESS ITY-ST-ZIP  | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete  Delete                 | Its registered office or re  OTE: Registered Agent signature r  VIII FEE IS-\$150.00:  OO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  | equired when reinstating)  10. E                    | lection Campaign Fin<br>rust Fund Contribution                             | DATE  Ancing  n.   CERS AND | \$5.0 Addec DIRECTOR: Change Change        | O May Be of to Fees S IN 11 Addition Addition                  |
| WEST PA  S. The above  SIGNATURE  9. This corpor  Tax filling it (See criter  1.  ITLE  AME  ITREET ADDRESS  ITY-ST-ZIP  TLE  AME  IREET ADDRESS  ITY-ST-ZIP  TLE  AME  IREET ADDRESS  ITY-ST-ZIP  TLE  AME  IREET ADDRESS  ITY-ST-ZIP  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL  | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete  Delete                 | DTE: Registered Office or re  DTE: Registered Agent signature re  VIII! FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | equired when reinstating)  10. E f State  ADDITIONS | lection Campaign Fin<br>rust Fund Contribution                             | DATE  ancing  CERS AND      | \$5.0 Addec DIRECTOR: Change Change        | D May Be d to Fees S IN 11 Addition Addition Addition          |
| WEST PA  SIGNATURE  9. This corpor Tax filling in (See criter)  1. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP TILE TREET ADDRESS ITY-ST-ZIP TILE TREET ADDRESS  | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays DIRECTORS  Delete  Delete  Delete          | DTE: Registered Office or re  DTE: Registered Agent signature re  VIII FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS | equired when reinstating)  10. E f State  ADDITIONS | lection Campaign Fin<br>rust Fund Contribution                             | DATE  ancing  CERS AND      | \$5.0 Addec DIRECTOR: Change Change        | O May Be d to Fees S IN 11 Addition Addition Addition          |
| WEST PA  MEST PA  MES | Signature, typed of contact on is eligible requirement arria on back)  DP FREELANI 4194 SEA VTS FREELANI 4194 SEA  | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays DIRECTORS  Delete  Delete  Delete          | DTE: Registered Office or re  DTE: Registered Agent signature r  VIII FEE IS-\$150.00:  DOO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP   | equired when reinstating)  10. E f State  ADDITIONS | lection Campaign Fin<br>rust Fund Contribution                             | DATE  ancing  CERS AND      | \$5.0 Addec DIRECTOR: Change Change        | D May Be d to Fees S IN 11 Addition Addition Addition Addition |
| WEST PARTIES OF TAX FILING INCOME.  9. This corporation for the corporation of the corpor | Signature, typed of containing the property of | submits this statement for a printed name of registered agent a color to satisfy its Intangible and elects to do so.  OFFICERS AND I  D, PATRICIA L  MIST WAY  TON FL 33467  D, PATRICIA L  MIST WAY | After May 1, 2 Make Check Pays  DIRECTORS  Delete  Delete  Delete  Delete | Its registered office or re  OTE: Registered Agent signature r  VIII FEE IS-\$150.00  OO2 Fee will be \$550  able to Department of  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP                                  | equired when reinstating)  10. E f State  ADDITIONS | lection Campaign Fin<br>rust Fund Contribution                             | DATE  ancing  CERS AND      | \$5.0 Addec DIRECTOR: Change Change Change | May Be d to Fees S IN 11 Addition Addition Addition Addition   |