

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 10, 2003 8:00 am**  
**Secretary of State**

04-10-2003 90156 036 \*\*\*150.00

DOCUMENT # **K30437**

1. Entity Name

RENT FREE REALTY, INC.



**DO NOT WRITE IN THIS SPACE**

**10065065**

2. Principal Place of Business  
2121 W. Oakland Park Blvd.

3. Mailing Address  
2121 W. Oakland Park Blvd.

Suite, Apt. #, etc.  
#11

Suite, Apt. #, etc.  
#11

DO NOT WRITE IN THIS SPACE

City & State  
Fort Lauderdale, FL

City & State  
Fort Lauderdale, FL

4. FEI Number  
65-0066357

Applied For  
Not Applicable

Zip  
33311

Country  
USA

Zip  
33311

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
Douglas Gallien

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

2121 W. Oakland Park Blvd., #11

City Fort Lauderdale, FL Zip Code 33311

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

Douglas Gallien (NOTE: Registered Agent signature required when reinstating)

4-7-03 DATE

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME Douglas Gallien  
STREET ADDRESS 2121 W. Oakland Park Blvd., #11  
CITY-ST-ZIP Fort Lauderdale, FL 33311

TITLE  
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with or without other life empowered.

SIGNATURE:

Douglas Gallien 4-7-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)