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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**  FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90070 002 \*\*\*150.00

DOCUMENT # K75873

FREESECO, INC.

Principal Place of Business 2130 NE 30TH ST.

Mailing Address

2130 NE 30TH ST.



LIGHTHOUSE POINT FL 33064		LIGHTHOUSE POINT FL 33064		DO NOT WRITE IN THIS SPACE				
105 6	Almeta Blue	1		`	3. Date Incorporated or Qualifed 03/28/1989			
2. Principal Pl	ace of Business	2a. Mailing Address		······	4. FEI Number	Ap	plied For	
21 800	RATION FC	26			65-0108978	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Re		
City & State City & State				, ,	6. Election Campaign Financing	\$5.00	May Be	
23 28					Trust Fund Contribution	Added to		
Zip Zip Country Zip Co					8. This corporation owes the current year	ar Intangible		
24 356	+3 LIS PAIN BOX	29 30			Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	ered Agent		
			81	Name				
FREESEM TIMOTHY J				82 Street Address (P.O. Box Number is Not Acceptable)				
2130 N.3. 30TH ST.				Street Address (F.O. Box Number is Not Acceptable)				
LIGH	TOUSE POINT FL 33064		83					
							20.00	
			84	City		FL 85 Zip C	,ode	
office or re agent. I a	to the provisions of Sections 60/0602 egistered agent, or both, in the State m familiar with, and accept the obligati	nd 607.1508, Florida Statutes, t Florida, Such change was authorions of, Section 607.0505, Florida	the above orized by Statutes	e-named co the corpora	orporation submits this statement for the purporation's board of directors. I hereby accept the a	se of changing its appointment as reg	registered gistered	
SIGNATURE	Signature, typed or printed name givegistated agent	and title if applicable. (NOTE: Reci	istered Ager	at signature regu	uired when reinstating) DA	TE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			Change	☐ Addition	
NAME	FREESE, TIMOTHY J.		1.2 NAME					
STREET ADDRESS	2130 N.E. 30TH STREET		13 STREET	ADDRESS				
			1.4 CITY-S					
CTTY-ST-ZIP			2.1 TTLE	<del>,</del>		Change	Addition	
Į.			2.2 NAME				_	
NAME	2130 N.E. 30TH STREET		2.3 STREET	r ADDDESS			1	
STREET ADDRESS				1				
CITY-ST-ZIP	LIGHTHOUSE POINT FL	☐ DELETE	2.4 CITY-S 3.1 TITLE	51-ZIP		☐ Change	Addition	
TITLE		_ ·	3.1 MAME		والمستحد المستحد المست		- ^ \	
NAME		Í	3.3 STREET	FADDDESS			(	
STREET ADDRESS								
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	11-217		☐ Change	Addition	
TITLE		C DECENE						
NAME			4. 2 NAME				1	
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP	<u> </u>	DELETE	4.4 CITY-S	T-ZIP		☐ Change	Addition	
TITLE		□ nerese	5.1 TITLE 5.2 NAME			0.10.1.90		
NAME				T ADDRESS	·			
STREET ADDRESS	·		5.4 CITY-S					
CITY-ST-ZIP		□ DELETE	6.1 TITLE	I-Zir		Change	Addition	
TITLE		☐ DELETE		İ	•	• Change	L. Addition	
NAME	•	,	6.2 NAME				Ì	
STREET ADDRESS		i		TADDRESS				
			CADITY C	7 71D			1	

14. I hereby certify that the information supplied with this fling 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 receive 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 any attackment with an address, with all other like empowered.

SIGNATURE: