

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N45224

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: HOUSE OF FREEDOM INC.

## Current Principal Place of Business:

2311 NORTH OBT  
KISSIMMEE, FL 34744 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 42 3202  
KISSIMMEE, FL 347423474 2S

## New Mailing Address:

FEI Number: 59-3084953

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, ESTEBAN  
1038 SHAWNOLA LN.  
KISSIMMEE, FL 34742 US

## Name and Address of New Registered Agent:

MORALES, ESTEBAN  
1038 SHAWNOLA LN.  
KISSIMMEE, FL 34742 US

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.

SIGNATURE:

05/01/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MORALES, ESTEBAN  
Address: 1038 SHAWNOLA LN.  
City-St-Zip: KISSIMMEE, FL 34742

Title: VD ( ) Delete  
Name: CRUZ, ROBERTO  
Address: 3501 WET FLAGLER AVE.  
City-St-Zip: MIAMI, FL 33135

Title: TD ( ) Delete  
Name: PONCE, IRIS Y  
Address: 994 CHEROKEE DR  
City-St-Zip: KISSIMMEE, FL 34744

Title: VDS ( ) Delete  
Name: MORALES, OLGA  
Address: 1038 SHAWNOLA LN.  
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete  
Name: AVILA, JOSE J  
Address: HIREM GONZILEZ #949  
City-St-Zip: GAMUY PUERTO RICO,

Title: D ( ) Delete  
Name: DONES, MARILU  
Address: 958 ST KM E.6  
City-St-Zip: RIO GRANDE, PUERTO RICO, OC

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTEBAN MORALES

PD

05/01/2002

Electronic Signature of Signing Officer or Director

Date