

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000098687

Entity Name: FLFREEZE CORP

FILED  
Apr 02, 2006  
Secretary of State

**Current Principal Place of Business:**

9214 LAZY LANE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

9214 LAZY LANE  
TAMPA, FL 33614

**New Mailing Address:**

16107 BELLE MEADE BLVD  
C/O MARTIN LUSTER  
TAMPA, FL 33556

FEI Number: 59-3677805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUSTER, MARTIN I  
16107 BELLE MEADE BLVD  
ODESSA, FL 33556 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LUSTER, MARTIN I  
Address: 16107 BELLE MEADE BLVD  
City-St-Zip: ODESSA, FL 33556

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN I. LUSTER

PRES

04/02/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date