2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P00000107877 1. Entity Name FINANCIAL FREEDOM INVESTMENT GROUP, INC.			FILED 04 DEC -2 PV	4:4 9 -
Principal Place of Business 1000 E ATLANTIC BLVD 2010	Mailing Address 1000 E ATLANTIC BLV		SEGRETARY OF S TALLAHASPEE, S	STATE LONDA
POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 2. Principal Place of Business 3. Mailing Address		33060		
6401 N. University Drive 6401 N. University Drive Suite, Apt. #, etc. Suite, Apt. #, etc.				
Apt. 316_ Apr. 316				34 (10/03)
City & State Tamarac, FL	City & State Tamarac, FL		4. FEI Number 65-1056129	Applied For Not Applicable
Zip Country 33321 USA	Zip 33321	Country USA		\$8.75 Additional Fee Required
-6. Name and Address of Curren	Registered Agent	Name	7. Name and Address of New Registered A	igent
BAKZAM, MICHAEL 2626 NE 11TH COURT		STHAM BOKZAM Street Address (P.O. Box Number is Not Acceptable)		
FT LAUDERDALE, FL 33304		6401 N. University Drive, Apt. 316		
			rac FL	Zip Code
8. The above seried 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 to the solitons of registered agent and life of applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10. OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE NAME	☐ Delete	TITLE P/I) lam Bokzam	☐ Change 🔀 Addition
STREET ADDRESS CITY-SI-ZIP 6401 N. University Drive, Apt. 316 Tamarac, FL 33321				
TITLE NAME STREET ADDRESS CITY-S1-ZIP	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-S1-ZIP	۰۰۰ . سور ۱۰۰۰	STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME	☐ Delete	TITLE	00010100	Change Addition
STREET ADDRESS CITY-S1-ZIP		STREET ADDRESS CITY-ST-ZIP	900043132 12/02/0401059015	7 ¥¥61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Change ☐ Addition
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 opticities empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment was a preparation of the corporation of the corporation of the receiver opticities and the my name appears in Block 10 or Block 11 if changed, or on an attachment was a preparation of the corporation of the receiver optically as a comparation of the corporation of the receiver optically as a comparation of the corporation of the receiver optically as a comparation of the corporation of the receiver optically as a comparation of the corporation of the receiver optically as a comparation of the corporation of the receiver optically as a comparation of the corporation of the corporation of the receiver optically as a comparation of the corporation of the corporatio				
SIGNATURE:				