

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048607

FILED
Apr 14, 2005
Secretary of State

Entity Name: FREEDOM FMA, INC.

Current Principal Place of Business:

789 CRANDON BLVD
901
KEY BISCAVNE, FL 33149

Current Mailing Address:

789 CRANDON BLVD
901
KEY BISCAVNE, FL 33149

New Principal Place of Business:

789 CRANDON BLVD
#901
KEY BISCAVNE, FL 33149

New Mailing Address:

170 HAMPTON LN
KEY BISCAVNE, FL 33149

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAZAR, LISETTE PIE P.A.
240 CRANDON BLVD
266
KEY BISCAVNE, FL 33149 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: MR () Delete
Name: ACQUAVIVA, JORGE F
Address: 789 CRANDON BLVD. #901
City-St-Zip: KEY BISCAVNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: ACQUAVIVA, JORGE F
Address: 170 HAMPTON LN
City-St-Zip: KEY BISCAVNE, FL 33149

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

SIGNATURE: JORGE ACQUAVIVA

MR

04/14/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date