2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P01000055546 **DOCUMENT #**

1. Entity Name

INISFREE VENTURES, INC.

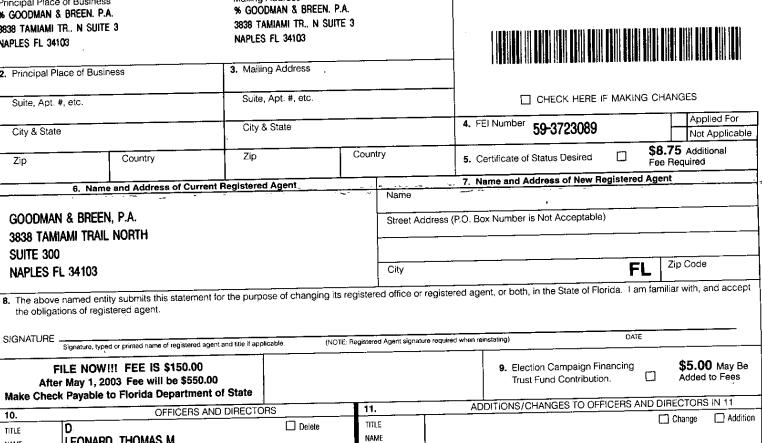


Principal Place of Business % GOODMAN & BREEN, P.A. Mailing Address % GOODMAN & BREEN, P.A.

3838 TAMIAMI TR NAPLES FL 34103	N SUITE 3	3838 TAMIAMI TR., N SUITE 3 NAPLES FL 34103				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Cour	Country		
	6. Name and Address of C	urrent Registered Agent_		Name		
GOODMAN &	BREEN, P.A.			Street Ado	ress (

FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90178 021 ***150.00



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TITLE	D	☐ Delete	TITLE			J-	
NAME	LEONARD, THOMAS M		NAME STREET ADDRESS				
STREET ADDRESS	701 105TH AVENUE N	•	CITY-ST-ZIP				ì
CITY-ST-ZIP	NAPLES FL 34108					☐ Change	Addition
TITLE	D	☐ Delete	TITLE			☐ Change	
NAME	LEONARD, CHARLES G		NAME				
STREET ADDRESS	P.O. BOX 1652		STREET ADDRESS				
CITY-ST-ZiP	BASALT CO 81621		CITY-ST-ZIP				[7] Addition
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CITY-ST-ZIP			CITY-ST-ZIP		<u> </u>		
		☐ Delete	TITLE			Change	Addition
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STREET ADDRESS		•	CITY-ST-ZIP	•			
CITY-ST-ZIP					Landa Otatulas I further	cortifu that the i	nformation
a the later of the second second	a partiful that the information supplied with this filing	na does not qualify for t	the exemption sta	ted in Section 119.0/(3)(i), \vdash	iorida Statutes, i iurther	t Lam an officer	or director

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 or trustee 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 with an address, with all other like empowered

SIGNATURE:

Daytime Phone #