## . 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 09, 2007 8:00 am Secretary of State DOCUMENT # P01000060607 02-08-2007 90056 019 \*\*\*150.00 1. Entity Name FREDA'S PLACE, INC. Principal Place of Business Mailing Address 211 S.W. 27TH AVENUE FT. LAUDERDALE FL 33312 211 S.W. 27TH AVENUE FT. LAUDERDALE FL 33312 - 1867 | 1867 | 1867 | 1868 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 | 1867 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, otc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & Stato City & State 4. FEI Number Applied For 65-1113876 Not Applicable Country \$8.75 Additional 5. Cortilicate of Status Dosirod Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARRIGAN, CURTIS 2820 N W 23RD STREET Stroot Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311 City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Squature, typed or printed name or registered agent and title if applicable. (NOTE: Regissered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. MILE Delete THEF ☐ Change Addition SWINTON, LORENZO NAME 211 S.W. 27TH AVENUE STREET ADDRESS. STREET ADDITISS FT. LAUDERDALE FL 33312 CHY-ST-ZIP CITY - S1 - 21P HHE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST ZIP Delete BTEE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY - ST- 7IP ШЕ Detele шш ☐ Change Addition NAME STREET ADDRESS SIRFET ADDRESS CITY-ST-ZIP CITY-SI-7IP THIS ☐ Defete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7P CITY - ST-78 ☐ Delete THILE TIFLE ☐ Change Addition NAME STREET ADORESS SIREFT ADDRESS CITY-ST-ZIP CITY-SI-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Soction 119, 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 logal effect as if made under cath; 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: Curty 3-3-07 554-709-733

FILED