## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000075586

Entity Name: FREEDOM MEDICAL, INC.

FILED Feb 03, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7301A W PALMETTO PK RD STE 100C BOCA RATON, FL 334333403 US **New Mailing Address: Current Mailing Address:** 7301A W PALMETTO PK RD SUITE 100C BOCA RATON, FL 334333403 US FEI Number: 26-0020860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEINROTH, ROBERT S ESQ 7301A W PÁLMETTO PK RD SUITE 100C BOCA RATON, FL 334333403 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition WEINROTH, ROBERT S Name: Name: 4118 BRIARCLIFF CIR Address: Address: City-St-Zip: BOCA RATON, FL 334964064 City-St-Zip: Title: DS () Delete Title: () Change () Addition YAFFE WEINROTH, PAMELA Name: Name: 4118 BRIARCLIFF CIR Address: Address: BOCA RATON, FL 334964064 City-St-Zip: City-St-Zip:

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: ROBERT S WEINROTH PRES 02/03/2005