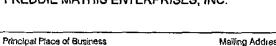
2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P03000071070 FREDDIE MATHIS ENTERPRISES, INC.

FILED Mar 16, 2006 08:00 AM Secretary of State



Mailing Address PO BOX 570931 MIAMI, FL 33257



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01072008 No Chg-P		CRC2E034 (11/05)		
4. FEI Number		· · · · · · · · · · · · · · · · · · ·	Applied For	
65-1205742			Not Applicable	
5. Certificate o	of Status Desired	Ø	\$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

MATHIS, FREDDIE 1000 PONCE DE LEON BLVD #115 CORAL GABLES, FL 33134

SIGNATURE: 🚐

PO 80X 570931 MIAMI, FL 33257

DO NOT WRITE IN THIS SPACE

		1					
 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							
Signature, typed or printed name of registrated agent and title if applicable. (NOTE Tregistered Agent signature required when constaining) DATE							
FILE NOWIS FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.			cing 🔀	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			<u> </u>		
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MATHIS, FREDDIE PO BOX 570931 MIAMI, FL 33257				U00000469772 03/27/06-80015-001 163.75		
TIFLE MAME STREET ADDRESS CITY-ST-ZIP	MATHIS, FREDDIE PO BOX 570931				03/27/06-80015-001 163.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TRILE HAME STREET ADDRESS CRY-ST-ZIP				IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADORESS CITY-ST-ZIP							
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or invitee empowered to extent 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.							