

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000084964

Entity Name: DIET FREEDOM, INC.

FILED
Jul 06, 2004
Secretary of State

Current Principal Place of Business:

19356 SW 5TH STREET
PEMBROKE PINES, FL 33029

New Principal Place of Business:

6810 STIRLING ROAD
DAVIE, FL 33024

Current Mailing Address:

19356 SW 5TH STREET
PEMBROKE PINES, FL 33029

New Mailing Address:

6810 STIRLING ROAD
DAVIE, FL 33024

FEI Number: 90-0117436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALINSKY, RUTH
19356 SW 5TH STREET
PEMBROKE PINES, FL 33029

Name and Address of New Registered Agent:

KALINSKY, RUTH
6810 STIRLING ROAD
DAVIE, FL 33024

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

07/06/2004

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KALINSKY, MARK
Address: 19356 SW 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: KALINSKY, RUTH
Address: 19356 SW 5TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KALINSKY, MARK
Address: 6810 STIRLING ROAD
City-St-Zip: DAVIE, FL 33024

Title: D (X) Change () Addition
Name: KALINSKY, RUTH
Address: 6810 STIRLING ROAD
City-St-Zip: DAVIE, FL 33024

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: MARK KALINSKY

D

07/06/2004

Electronic Signature of Signing Officer or Director

Date