

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033111

FILED
Jan 09, 2007
Secretary of State

Entity Name: FREEDOM PUBLIC ADJUSTERS, INC.

Current Principal Place of Business:

13350 SW 128 STREET, SUITE B
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

13350 SW 128 STREET, SUITE B
MIAMI, FL 33196

New Mailing Address:

FEI Number: 20-2425359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: ARTILES, JUAN
Address: 13350 SW 128 STREET, SUITE B
City-St-Zip: MIAMI, FL 33186

Title: DVP () Delete
Name: GIAMBARBA, ANDREW
Address: 13350 SW 128 STREET, SUITE B
City-St-Zip: MIAMI, FL 33186

Title: DS () Delete
Name: ZAMBRANO, ELIZABETH M
Address: 13350 SW 128 STREET, SUITE B
City-St-Zip: MIAMI, FL 33186

Title: DT () Delete
Name: ARTILES, CHEYLENE
Address: 13350 SW 128 STREET, SUITE B
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CHEYLENE ARTILES

DT

01/09/2007

Electronic Signature of Signing Officer or Director

Date