

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000086617

FILED
Aug 18, 2006
Secretary of State

Entity Name: FREE INTERNATIONAL, INC.

Current Principal Place of Business:

18350 NW 2ND AVENUE
SUITE 500
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

18350 NW 2ND AVENUE
SUITE 500
MIAMI, FL 33169

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDWARDS, PATRICIA E
17000 N.W. 67TH AVENUE
APT. 329
HIALEAH, FL 33015 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

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: SIMMONDS, FRANCENE
Address: 10720 NE 29TH STREET #151
City-St-Zip: BELLEVUE, WA 98004

Title: D () Delete
Name: EDWARDS, PATRICIA E
Address: 17000 NW 67TH AVENUE #329
City-St-Zip: HIALEAH, FL 33015

Title: D () Delete
Name: TAYLOR, NICHOLENE
Address: 8 BIRDSUCKER HEIGHTS
City-St-Zip: KINGSTON 8 JAMAICA WEST INDI,

Title: D () Delete
Name: TAYLOR, CAMILLE
Address: 8 BIRDSUCKER HEIGHTS
City-St-Zip: KINGSTON 8 JAMAICA WEST INDI,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SIMMONDS, FRANCENE
Address: 4371 PRESERVE TRAIL
City-St-Zip: SNELLSVILLE, GA 30039

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: PATRICIA E. EDWARDS

D

08/18/2006

Electronic Signature of Signing Officer or Director

Date