2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049193

Entity Name: FREE LAND VACATIONS INC.

FILED Sep 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

555 NE 15TH STREET STE 7714 8410 NW 53RD TERR STE 121

MIAMI, FL 33132 DORAL, FL 33166

Current Mailing Address: New Mailing Address:

555 NE 15TH STREET STE 7714 PO BOX 820636

MIAMI, FL 33132 PEMBROKE PINES, FL 33082

FEI Number: 20-8930760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIACAMAN, NICOLAS A
555 NE 15TH STREET STE 7714
MIAMI, FL 33132
US
GIACAMAN, NICOLAS A
8410 NW 53RD TERR STE 121
DORAL, FL 33166
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: NICOLAS A GIACAMAN 09/09/2008

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: DP () Delete
Name: GIACAMAN, NICOLAS A

Address: 555 NE 15TH STREET STE 7714

City-St-Zip: MIAMI, FL 33132

Title: D (X) Delete
Name: GONZALEZ, FRANCISCO V JR

Address: 555 NE 15TH STREET STE 7714

City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

Name: GIACAMAN, NICOLAS A Address: 8410 NW 53RD TERR STE 121

City-St-Zip: DORAL, FL 33166

Title: () Change () Addition

Name: Address: Citv-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NICOLAS A GIACAMAN PD 09/09/2008