2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

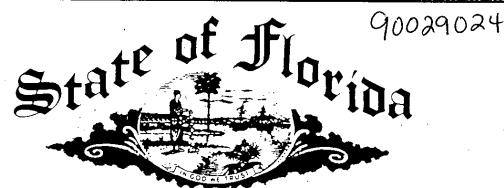
P94000010555 DOCUMENT

1. Entity Name FREEDOM TRANSPORT, INC. ゆるか

Mobile Communication Systems The



Principal Plac 1600 E. MAIN S LEESBURG FL US	STREET 34748	Mailing Address P.O. BOX 537 LAKE PANASOFFKEE FL 335 US	38-0537		
2. Principal P	Place of Business CR 309-B	3. Mailing Address 4150 C人	309-B		MIN MANNY NIMEL MANNY ANIMA MINDI MINI 1981
Suite, Apt.		Suite, Apt. #, etc.	<u> </u>	☐ CHECK HERE IF	MAKING CHANGES
City & Stat んみどだ	PANASOFFKEE,FI	City & State LAKE PANAS	offkee, F/	4. FEI Number 59-3224155	Applied For Not Applicable
zip 3353	Country	33538	Country USA	5. Certificate of Status Desired	S8.75 Additional Fee Required
-	6. Name and Address of Current I	Registered Agent	Nasia at t	7. Name and Address of New Re	gistered Agent
COLICH C	EM C		Name * *		
GOUGH, GEM C 4750 CR 309 B			Street Address (P.O. Box Number is Not Acceptable)		
P.O. BOX 537					
LANE PAIN	ASOFFKEE FL 33538		City		FL Zip Code
8. 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 registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	signature, typed or printed name or registered agent a	no title it applicable. (NOTE: I	Registered Agent signature require	ed when (einstating)	DATE
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State		Election Campaign Fina Trust Fund Contribution.	
10.	OFFICERS AND (DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 11
NAME	DVST- Pres, Sue, Tres GOUGH, GEM C 4750 CR 309-B LAKE PANASOFFKEE FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ADBERT B SELIAN, III 4750 CR DOG-B LAKE PANASOFF KEE, F	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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indicated	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empore	true and accurate and that my	signature shall have the	same legal effect as if made under oa	th; that I am an officer or director



AHAChment.

Bepartment of State

P94000010555

I certify from the records of this office that MOBILE COMMUNCIATION SYSTEMS, INC. is a Fictitious Name registered with the Department of State on January 6, 2003.

The Registration Number of this Fictitious Name is G03006900051.

I further certify that said Fictitious Name Registration is active.

I further certify that this office began filing Fictitious Name Registrations on January 1, 1991, pursuant to Section 865.09, Florida Statutes.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Sixth day of January, 2003



CR2EO22 (7-02)

Jim Smith Secretary of State