FILED

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90062 039 ***150.00

A CROCKBOOK AND COCKE COREC ADDIES BOOKE BOOKE AREAS AND EVER BUREL OFFICE OF A COURT

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000071049

1. Corporation Name

FREEDOM CAR CARE, INC.

									4 	
Principal Place of Business Mailing Address								MM1 11914 E0111	01310 1011 1001	
2500 HOLLYWO	OD BLVD	2500 (HOLLYWOOD BLVD							
212			STE 212				DO NOT IMPLIE IN THIS SPACE			
HOLLYWOOD FL 33020 US HOLLYWOOD FL 33020 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
00		00					08/15/1997		Į	
2. Principal Place of Business 2a. Mailin			ailing Address				4. FEI Number	T A	pplied For	
21		26	_				65-07767 <u>56</u>	No.	ot Applicable	
Suite, Apt.	#, etc.	Sı	uite, Apt. #. etc.				5. Certifcate of Status Desired		Additional	
22		27					5. Certificate of Status Desired		equired	
City & State	9	c	ity & State				6. Election Campaign Financing		May Be	
23		28					Trust Fund Contribution		to Fees	
Zip	Country	Zi	р [3	Country	'		This corporation owes the current year Intagent Personal Property Tax.	ngibie Yes	□No	
24	9. Name and Address of Curre	29 nt Register		0			10. Name and Address of New Registered A			
	5. Name and Address of Curre	iit ivegistei	eu Agent	81	Nam		10.	-		
KLAF	PHOLZ, JOSEPH P			_			(D.O. Day Mumber in Net Accomplete)			
2500	HOLLYWOOD BLVD			82	Stree	t Adare	ess (P.O. Box Number is Not Acceptable)			
STE	-			83						
HOL	LYWOOD FL 33020			84	City			85 Zip	Code	
					1		<u>FL</u>	· ·		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.	1508, Florida Statutes	the abov	e-name	d corpo	pration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	changing its	s registered	
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	ations of, Se	ection 607.0505, Floric	la Statute:	ine co:	poration	is boald of directors. Friendly accept the appoint	unom ao n	- J	
SIGNATURE							•		(
	Signature, typed or printed name of registered ag		<u> </u>	·	nt signatur	e required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTO	100 IN 12	
12.	PVST OFFICERS A	NO DIRECT	DELETE	13.		Т	ADDITIONS/GNANGES TO OFFICE NO ANI	Change	Addition	
NAME	RETTERATH, ROBERT			1.2 NAME		-				
STREET ADDRESS	2500 HOLLYWOOD BLVD, SU	IITE 212		1.3 STREE	TADDRES	s				
CITY-ST-ZIP	HOLLYWOOD FL 33020			1.4 CITY-5						
TITLE	1,022,000,12,002,1		DELETE	2.1 TITLE		+		Change	☐ Addition	
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	T ADDRES	s		•		
CITY-ST-ZIP				2.4 CITY-	ST-ZIP	}		<u></u>		
TITLE			☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME				3.2 NAME				•	į	
STREET ADDRESS				3.3 STREE	TADDRES	s			Ì	
CITY-ST-ZIP				3.4. CITY-	ST-ZIP					
TITLE			☐ OELETE	4.1 TITLE				☐ Change	Addition	
NAME				4.2 NAME		Ì	·		ĺ	
STREET ADDRESS				4.3 STREE	TADORES	s				
CITY-ST-ZIP	_		□ pri ere	4.4 CITY-1	ST-ZIP	+-		☐ Change	Addition	
TITLE			☐ DELETE	51 TITLE]		□ Mande	F) vagarion	
NAME				5.2 NAME	T ADDDC					
STREET ADDRESS				5.3 STREE		9				
CITY-ST-ZIP			DELETE	5.4 CITY - 5 6.1 TITLE) - LIP	┼		Change	Addition	
TITLE			□ O£FEIE	6.2 NAME						
NAME					T ADDRES	s			ļ	
STREET ADDRESS				0.5 5 INEC	.,,	~			1	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

Feb. 15, 1999