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Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90217 020 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000074126

1. Corporation Name
FREEZETEC, INC.



Principal Place of Business
 191 DRENNEN ROAD
 ORLANDO FL 32806

Mailing Address
 191 DRENNEN ROAD
 ORLANDO FL 32806

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/24/1998

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
 59-3549470

Applied For
 Not Applicable

21 Suite, Apt. #, etc.
 Suite 511

26 P.O. Box 568894

5. Certificate of Status Desired **\$8.75** Additional Fee Required

23 City & State

27 Suite, Apt. #, etc.
 28 Orlando, FL

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24 Zip Country

29 Zip Country
 30 32856 USA

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOOBLATT, AMY E
 221 NE IVANHOE BLVD STE 205
 ORLANDO FL FL328-04

81 Name Goodblatt, Amy E.
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code 32804

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME EVANS, DANIEL J
 STREET ADDRESS 191 DRENNEN ROAD
 CITY-ST-ZIP ORLANDO FL 32806

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS 191 Drennen Rd., Suite 511
 1.4 CITY-ST-ZIP

TITLE DELETE
 NAME SCGENNEK, BARRETT H
 STREET ADDRESS 191 DRENNEN ROAD
 CITY-ST-ZIP ORLANDO FL 32806

2.1 TITLE Change Addition
 2.2 NAME Schemmel, Barrett J.
 2.3 STREET ADDRESS 191 Drennen Rd., Suite 511
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 2 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel J. Evans* Daniel J. Evans

4/21/99

407-857-7016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)