

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

FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90092 009 ***150.00

DOCUMENT # P98000104845

1. Corporation Name

FREEDOM ENTERTAINMENT ENTERPRISES, INC.

Principal Place of Business

1600 SOUTH TREASURE DRIVE
NORTH BAY VILLAGE FL 33141

Mailing Address

1600 SOUTH TREASURE DRIVE
NORTH BAY VILLAGE FL 33141

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1998

4. FEI Number

APPLIED FOR

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes
☒ No

2. Principal Place of Business

21 1600 South Treasure Drive

2a. Mailing Address

26 1600 South Treasure Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 North Bay Village, Florida

City & State

28 North Bay Village, Florida

Zip

24 33141

Country

25 USA

Zip

29 33141

Country

30 USA

9. Name and Address of Current Registered Agent

KAHN, DONALD J
317 71ST STREET
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name DONALD J. KAHN ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

317-71 STREET

83

84 City

Miami Beach

FL

85 Zip Code

33141

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

DONALD J. KAHN

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

(NOTE: Registered agent signature required when reinstating)

Jan. 19, 1999

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PSTD
KAHN, DAVID
STREET ADDRESS 1600 SOUTH TREASURE DRIVE
CITY-ST-ZIP NORTH BAY VILLAGE FL 33141

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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CITY-ST-ZIP

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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID KAHN PRES & CO

Jan. 19, 1999

Date

305-8654311

Daytime Phone #

CR2F034 (11/98)