"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 # P98000107450 1. Corporation Name

FREEYELLOW.COM INC.

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90089 036 ***150.00



Principal Place	of Business	Ma	iling Address	 .							
134 W. PALMET		5	W. PALMETTO PARK	RD							
SUITE 345 SUITE 345											
BOCA RATON FL 33486 BOCA RATON FL 33486								DO NOT WR		SPACE	
								rporated or Qualifed	1		
							12/29/19				
2. Principal Pl	ace of Business	2a.	Mailing Address				4. FEL Numb	er ACCATEDO			Applied For
21		26					00-	0885300			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certifcate	of Status Desired		-	Additional Required
City & State City & State							6. Election C	ampaign Financing			0 мау Ве
23		28					Trust Fund	Contribution		Adde	d to Fees
Zip	Country	Щ.	Zip	Coun	itry		8. This corpo	oration owes the cui	πent year In t		
24	25	29		30			'	Property Tax.		Yes	□No
	9. Name and Address of Curre	ent Regist	ered Agent		<u> 1</u>	N	10. Name and	d Address of New	Registered	Agent	
>	salma 1				81	Name J	カイル /	MILINO	,		
	SS, VNC.			ŀ	82	Street Addre	ss (P.O. Box No	mber is Not Accep	م در رواوه	7/2 /	2004 0
3/32	N.W. 18TH STREET						388	W: 1	HIME	<u> </u>	ANK KE
FI. U	AUDERDALE FL 33311-4132				83		317 A	DAT	71/		
	` \			-	84	City	10011	101111	<i>// U</i>	85 .Zig	0 Cod9 /C/
					۱	City			FL	. "]	3348L
11. Pursuant t	to the provisions of Sections 607.05	02 and 60	7.1508, Florida Statu	ites, the ab	ove	-named corpo	ration submits ti	his statement for the	purpose of	changing i	its registered
office or re	egistered agent, or both, in the State of familiar with, and accept the applications	e of Florid ations of	a. Such change-was Section 607/05/15. Fl	authorized odda/Statu	byt kars.	the corporation	n's board of dire	ctors. I nereby acce	ept the appoi	nunent as	registered
	V-60 1/6	Kio	as Fresc	11. 1	-	-		3/9	199		
SIGNATURE	Signature, typed or printed name of registered as			E: Registered A	-Dent	signature required			DATE		
12.	OFFICERS A	ND DIRE	CTORS	13.			ADDITIONS	S/CHANGES TO O	FFICERS AN	ID DIRECT	FORS IN 12
TITLE	D		☐ DELETE	1.1 TITL	Ē					Change	e 🔲 Addition
NAME	MOLINO, JOHN P			1.2 NAM	ИΕ						
	1346W. PALMETTO PARK RD			1.3 STR	REET	ADDRESS					
	BOCA RATON FL 33486			1.4 CIT	Y-ST	- ZIP					_
TITLE		•	☐ DELETE	2.1 TFT	Æ					☐ Change	e 🔲 Addition
NAME				2.2 NAA	Æ						
STREET ADDRESS				2.3 STF	REET.	ADDRESS					
CITY-ST-ZIP				2. 4 CIT		- 1					
TITLE			DELETE	3.1 TITL						Change	e
NAME				3.2 NA	ИE						
STREET ADDRESS	•					ADDRESS -				-	`
CITY-ST-ZIP				3.4. CIT							
TITLE	_		☐ DELETE	4.1 TFT						Change	e Addition
NAME			<u> </u>	4.2 NA						•	
						ADDRESS					
STREET ADDRESS				4.3 S/F		- "					
CITY-ST-ZIP TITLE			☐ DELETE	5.1 TITL		-715				Change	e Addition
				5.1 HIL							
NAME						ADDRESS					
STREET ADDRESS	i,			5.4 CIT							
CITY-ST-ZIP			☐ DELETE	6.1 TITE						☐ Change	e Addition
TITLE			C OCTEVE	6.2 NA						- Sumily	
NAME						ADDDESC					
STREET ADDRESS						ADDRESS					
CITY, CT. 7ID				6.4 CIT	r ST	•∠ı⊬					

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: