

FILED
Jun 21, 2004 8:00 am
Secretary of State

06-21-2004 90002 047 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S76661

1. Entity Name
FREEMOND PLASTICS, INC.



Principal Place of Business
5925 SW 21ST ST
HOLLYWOOD, FL 33023

Mailing Address
5925 SW 21ST ST
HOLLYWOOD, FL 33023

54058104



04222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0277013	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FREEMOND, ROBERT
5925 SW 21ST ST
HOLLYWOOD, FL 33023

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FREEMOND, ROBERT
STREET ADDRESS	5925 SW 21ST ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	D
NAME	FREEMOND, TERRI
STREET ADDRESS	5925 SW 21ST ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes; I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert J. Freemond 4/28/04 (854) 963-7444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment 54058104
Doc. # 576661

To Whom it May Concern;

I originally mailed my report on
April 28, 2004 with my check for
150⁰⁰ (ck. # 12540) I don't know
what happened to the check, so here
is a replacement.

Thank you.

Bob Freund