

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
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90073 001 ***150.00

DOCUMENT # V73097

1. Corporation Name
FREESTYLE DESIGNS, INC.

Principal Place of Business
17632 C ASHBOURNE LANE
BOCA RATON FL 33496
1051 NW 85th TERRACE
PLANTATION FL 33322

Mailing Address
17632 C ASHBOURNE LANE
BOCA RATON FL 33496
1051 N.W 85th TERRACE
PLANTATION FLA 33322

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1992

4. FEI Number

65-0372389

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$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 1051 N.W 85th TERRACE

Suite, Apt. #, etc.

22 PLANTATION, FL

City & State

23 33322 USA

Zip

Country

24

25

2a. Mailing Address

26 1051 N.W 85th TERRACE

Suite, Apt. #, etc.

27 PLANTATION, FL

City & State

28 33322 USA

Zip

Country

29

30

9. Name and Address of Current Registered Agent

YOUNG, LINDA
17652 C. ASHBOURNE LANE
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81 Name

LINDA YOUNG

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

1051 NW 85th TERRACE

83

PLANTATION

84 City

FL

85 Zip Code

33322

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

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

4/8/99
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> DELETE	D YOUNG, LINDA	17652 C ASHBOURNE LN 1051 NW 85th TERRACE	BOCA RATON FL PLANTATION FL 33322
<input type="checkbox"/> DELETE			
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<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			
<input type="checkbox"/> DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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:

Linda Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/8/99

984-916-0050

CR2E034 (11/98)

0365390