2007 FOR PROFIT CORPORATION ANNUAL REPORT

V# 16269

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # F03000001030

1. Entity Name
COLORTYME, INC.

Principal Place of Business	Mailing Address
5700 TENNYSON PKWY STE. 180 PLANO, TX 75024	5700 TENNYSON PKWY STE. 180 PLANO, TX 75024

DO NOT WRITE IN THIS SPACE

01052007 No Chg-P CR2E034 (11/05)

4. FEI Number
75-2651408
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	VD#
NAME	SPEESE, MARK
STREET ADDRESS	5700 TENNYSON PKWY STE. 180
CITY-ST-ZIP	PLANO, TX 75024
TITLE	VD
NAME	FADEL, MITCHELL
STREET ADDRESS	5700 TENNYSON PKWY STE. 180
CITY-ST-ZIP	PLANO, TX 75024
TITLE	CP
NAME	BLOOM, ROBERT
STREET ADDRESS	5700 TENNYSON PKWY, STE 180
CITY-ST-ZIP	PLANO, TX 75024
TITLE	S
NAME	KORST, CHRISTOPHER
STREET ADDRESS	5700 TENNYSON PKWY STE. 180
CITY-ST-ZIP	PLANO, TX 75024
TITLE	T
NAME	DAVIS, ROBERT
STREET ADDRESS	5700 TENNYSON PKWY STE. 180
CITY-ST-ZIP	PLANO, TX 75024
TITLE	AS
NAME	WOLVERTON, DAWN
STREET ADDRESS	5700 TENNYSON PKWY 3RD FLOOR
CITY-ST-ZIP	PLANO, TX 75024

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02/21/07-80021-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Dawn Wolverton 1/15/07 (972) 801 1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #