

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 17, 1999 8:00 am**  
**Secretary of State**

05-17-1999 90088 047 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # PG7000025160  
 Corporation Name

300030 - 90088 - 47

PRIMATURE PARTNERS, INC.  
 Principal Place of Business: 325 CLOVERDALE #107 LOS ANGELES CA 90036  
 Mailing Address: 325 CLOVERDALE #107 LOS ANGELES CA 90086

DO NOT WRITE IN THIS SPACE

26. Mailing Address: 325 CLOVERDALE #107 LOS ANGELES CA 90086  
 27. City & State: LOS ANGELES CA  
 28. Zip: 90086  
 29. Country: USA

3. Date incorporated or Qualified: 10/24/97  
 4. FEI Number: 911792611  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent:  
 FLORIDA INCORPORATORS  
 1221 BRICKELL AVE #900  
 MIAMI, FL 33131

10. Name and Address of New Registered Agent:  
 81. Name:  
 82. Street Address (P.O. Box Number is Not Acceptable):  
 83. City:  
 84. State: FL Zip Code:

Pursuant to the provisions of Sections 607.0502 and 607.1606, 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 607.0506, Florida Statutes.

SIGNATURE: [Signature] DATE: [Date]

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE: PRESIDENT	<input type="checkbox"/> DELETE	1.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME: BRENDAN NELSON		1.2 NAME:	
3. STREET ADDRESS: 325 CLOVERDALE #107 LOS ANGELES CA 90036		1.3 STREET ADDRESS:	
4. CITY-ST-ZIP: LOS ANGELES CA 90036		1.4 CITY-ST-ZIP:	
5. TITLE: Vice President	<input type="checkbox"/> DELETE	2.1 TITLE: VICE PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME: John Geist		2.2 NAME: JOHN GEIST	
7. STREET ADDRESS: 2121 Pacific Coast Hwy #4 Heron's Beach CA 90254		2.3 STREET ADDRESS: 2121 PACIFIC COAST HWY #4 HERON'S BEACH CA 90254	
8. CITY-ST-ZIP: Heron's Beach CA 90254		2.4 CITY-ST-ZIP: HERON'S BEACH CA 90254	
9. TITLE:	<input type="checkbox"/> DELETE	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME:		3.2 NAME:	
11. STREET ADDRESS:		3.3 STREET ADDRESS:	
12. CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME:		4.2 NAME:	
15. STREET ADDRESS:		4.3 STREET ADDRESS:	
16. CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
17. TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME:		5.2 NAME:	
19. STREET ADDRESS:		5.3 STREET ADDRESS:	
20. CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: BRENDAN NELSON  
 SIGNATURE REQUIRED PRESIDENT 4/30/99 323 930 9037  
 Date: 4/30/99