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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

F95278

(0)

PRIME TIME SALES, INC.

FILED Jan 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address C/O ESSIE PRINCE C/O ESSIE PRINCE 204 NE 18T AVENUE 1101 E HALLENDALE BCH BLVD HALLANDALE FL 33009 HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/05/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2206954 21 Not Applicable ulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PRINCE, ESSIE 830 NE 27TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) HALLANDALE FL 83 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE Change Addition TITLE 1.1 TITLE PRINCE, ESSIE NAME 1.2 NAME **CR2E034** 830 NE 27TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE VD DELETE 2.1 TITLE Change Addition PRINCE, AARON NAME 2.2 NAME 830 NE 27TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 2. 4 CiTY - ST - ZiP DELETE TITLE 3.1 TITLE Addition PRINCE, AARON 3.2 NAME 830 NE 27TH AVENUE STREET ADDRESS 3.3 STREET ADDRESS HALLANDALE FL CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change \_\_\_ Addition 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE \_\_\_ Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE Change TITLE 6 1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

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.