

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005118

Entity Name: TIME SERVICE, INC.

FILED
Jun 15, 2009
Secretary of State

Current Principal Place of Business:

245 23RD ST.
TOLEDO, OH 43604

New Principal Place of Business:

Current Mailing Address:

245 23RD ST.
TOLEDO, OH 43604

New Mailing Address:

FEI Number: 34-4373785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE - SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOLDBERG, LAWRENCE
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

Title: D () Delete
Name: PERLMUTTER, SHIMON
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

Title: VPSD () Delete
Name: PERLMUTTER, STEVEN
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

Title: DC () Delete
Name: PERLMUTTER, DAVID
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

Title: T () Delete
Name: KERSTEN, JAMES
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPSD (X) Change () Addition
Name: PERLMUTTER, DAVID
Address: 245 23RD ST.
City-St-Zip: TOLEDO, OH 43604

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES KERSTEN

T

06/15/2009

Electronic Signature of Signing Officer or Director

Date