2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# N96000003771

Entity Name: PRIME TIME SENIORS, INC.

Current Principal Place of Business:

565 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

565 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 65-0690724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERTZ, JACQUELINE S
565 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HERTZ, JACQUELINE S
Address: 565 NORTH SHORE DRIVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete
Name: MARTINEZ, BERNICE
Address: 900 WEST AVENUE #201
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: WAKS, DEBORAH
Address: 6600 SW 75 TERR
City-St-Zip: SOUTH MIAMI, FL 33143

Title: D ( ) Delete
Name: BRYN, KRISTINA
Address: 9120 WEST BAY HARBOR DRIVE
City-St-Zip: BAY HARBOR, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: WAKS, DEBORAH
Address: 7103 SW 102ND AVENUE, SUITE A
City-St-Zip: MIAMI, FL 33173

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELINE S. HERTZ PRES 04/26/2005

Electronic Signature of Signing Officer or Director — Date