

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000054619

Entity Name: PRIMETIME TRENDS, INC.

FILED
Sep 18, 2007
Secretary of State

Current Principal Place of Business:

501 WEST PALM DRIVE
SUITE #106
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

501 WEST PALM DRIVE
SUITE #106
FLORIDA CITY, FL 33034

New Mailing Address:

FEI Number: 90-0294618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEDD, DAVID E II
2330 SE 21ST STREET
HOMESTEAD, FL 33035 US

Name and Address of New Registered Agent:

SHEDD, DAVID E II
501 W PALM DRIVE
#106
FLORIDA CITY, FL 33034 US

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:

09/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: SHEDD, SHEILA P DIR
Address: 2330 SE 21 STREET
City-St-Zip: HOMESTEAD, FL 33035 US

Title: MGR () Delete
Name: SHEDD, DAVID E MGR
Address: 2330 SE 21 STREET
City-St-Zip: HOMESTEAD, FL 33035 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEDD, SHEILA P
Address: 501 W PALM DRIVE #106
City-St-Zip: FLORIDA CITY, FL 33034 US

Title: VP (X) Change () Addition
Name: SHEDD, DAVID E
Address: 501 W PALM DRIVE #106
City-St-Zip: FLORIDA CITY, FL 33034 US

Title: DIR () Change (X) Addition
Name: CARSON, COLETTE F
Address: 501 W PALM DRIVE #106
City-St-Zip: FLORIDA CITY, FL 33034 US

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: SHEILA P SHEDD

P

09/18/2007

Electronic Signature of Signing Officer or Director

Date