2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007
Secretary of State

DOCUMENT# P03000121808

Entity Name: PRIME MEMORYSOLUTION INC.

Current Principal Place of Business:

10911 BONITA BEACH RD #2011
BONITA SPRINGS, FL 34135

New Principal Place of Business:

9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135

Current Mailing Address:

10911 BONITA BEACH RD #2011
BONITA SPRINGS, FL 34135

New Mailing Address:

9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135

FEI Number: 20-0337154 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUBER, VOLKER
10911 BONITA BEACH RD #2011
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

HUBER, VOLKER
9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135 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: HUBER VLOKER 03/26/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HUBER, VOLKER
Address: 10911 BONITA BEACH RD #2011
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: HUBER, VOLKER
Address: 9420 FOUNTAIN MEDICAL CT #101
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the 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: HUBER VOLKER P 03/26/2007
Electronic Signature of Signing Officer or Director Date