

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000133807

1. Entity Name
PRIME CAPITAL SERVICES GROUP INC.



Principal Place of Business

P.O. BOX 810543
BOCA RATON, FL 33481 US

Mailing Address

P.O. BOX 810543
BOCA RATON, FL 33481 US

DO NOT WRITE IN THIS SPACE



05022006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0397726

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRIEDMAN, RONALD
18219 BLUE LAKE WAY
BOCA RATON, FL 33498

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FRIEDMAN, RONALD
STREET ADDRESS	P.O. BOX 810543
CITY-ST-ZIP	BOCA RATON, FL 33481
TITLE	VP
NAME	FRIEDMAN, RONALD
STREET ADDRESS	P.O. BOX 810543
CITY-ST-ZIP	BOCA RATON, FL 33481
TITLE	T
NAME	FRIEDMAN, RONALD
STREET ADDRESS	P.O. BOX 810543
CITY-ST-ZIP	BOCA RATON, FL 33481
TITLE	S
NAME	FRIEDMAN, RONALD
STREET ADDRESS	P.O. BOX 810543
CITY-ST-ZIP	BOCA RATON, FL 33481
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/19/06-80077-011 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald Friedman **RONALD FRIEDMAN P** 5-2-06(56)451-4397
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #