

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155561

Entity Name: SHOWTYME HOMES, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

4830 DORCHESTER NEWS
WEST PALM BEACH, FL 33415

New Principal Place of Business:

3540 FOREST HILL BLVD
112
WEST PALM BEACH, FL 33406

Current Mailing Address:

P.O. BOX 15511
WEST PALM BEACH, FL 33416

New Mailing Address:

FEI Number: 32-0132440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILLARD, KALINTHIA ESQ.
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

LEBOW, PATRICIA PA
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: PATRICIA LEBOW

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: CARTER, DAVID
Address: 4830 DORCHESTER NEWS
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: CARTER, DAVID
Address: 3540 FOREST HILL BLVD 112
City-St-Zip: WEST PALM BEACH, FL 33406

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: DAVID CARTER

PTSD

04/30/2006

Electronic Signature of Signing Officer or Director

Date