2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000172456

FILED Sep 21, 2009 Secretary of State

| Entity Na | me: PRIMEF | LUS ACQUISITION CORP. | | | | |
|---|---|--------------------------------|------------|---|---|--|
| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
| 15924 ASSEMBLEY LOOP JUPITER, FL 33478 | | | | 65A FULLERWOOD DRIVE ST. AUGUSTINE, FL 32084 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 15924 ASSEMBLEY LOOP JUPITER, FL 33478 | | | | 65A FULLERWOOD DRIVE ST. AUGUSTINE, FL 32084 | | |
| FEI Number | : 20-2060601 | FEI Number Applied For () | FEI Num | ber Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| 3300 PGA | N, ELLIOT F BLVD., SUITE ACH GARDEN | | | | | |
| | e named entity e of Florida. | submits this statement for the | purpose of | changing its registere | ed office or registered agent, or both, | |
| SIGNATUI | RE: | | | | | |
| | Electro | nic Signature of Registered Ag | jent | | Date | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | O'BRIEN, THE | CLE, UNIT 205 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | GALLAGHER, | BLVD., SUITE 201 | | Title: Name: Address: City-St-Zip: | () Change() Addition | |
| Title: Name: Address: City-St-Zip: | D (DELL, JOHN E 15924 ASSEM JUPITER, FL | BLY LOOP | , | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: THERESA O'BRIEN 09/21/2009 D