

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090569

FILED
Apr 26, 2006
Secretary of State

Entity Name: THYME FINANCIAL SERVICES, INC.

Current Principal Place of Business:

10086 GRIFFIN ROAD
COOPER CITY, FL 33328

New Principal Place of Business:

Current Mailing Address:

10086 GRIFFIN ROAD
COOPER CITY, FL 33328

New Mailing Address:

FEI Number: 20-4761146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MITCHELL, WESLEY
3800 SW 142ND AVE
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

MITCHELL, DOUGLAS L
10086 GRIFFIN ROAD
COOPER CITY, FL 33328 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: DOUGLAS L. MITCHELL

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: MITCHELL, WESLEY
Address: 3800 SW 142ND AVE
City-St-Zip: DAVIE, FL 33330

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MITCHELL, WESLEY
Address: 10086 GRIFFIN ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: VP () Change (X) Addition
Name: DOUGLAS, MITCHELL L
Address: 10086 GRIFFIN ROAD
City-St-Zip: COOPER CITY, FL 33328

Title: S () Change (X) Addition
Name: NORMA, MITCHELL G
Address: 10086 GRIFFIN ROAD
City-St-Zip: COOPER CITY, FL 33328

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: NORMA G. MITCHELL

S

04/26/2006

Electronic Signature of Signing Officer or Director

Date