

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000004093

Entity Name: PRIME TIME TATTOO'S, INC.

FILED
Nov 26, 2008
Secretary of State

Current Principal Place of Business:

3013 SE 5TH STREET
FT LAUDERDALE, FL 33316

New Principal Place of Business:

2841 NORTH OCEAN BLVD
APT. 401
FORT LAUDERDALE, FL 33308

Current Mailing Address:

3013 SE 5TH STREET
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 03-0578151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARISI, PETER P
4045 NW 16TH STREET SUITE 111
FT LAUDERDALE, FL 33313 US

Name and Address of New Registered Agent:

LIVOTI, ANTHONY M ESQ
721 NE 3RD AVENUE
FT LAUDERDALE, FL 33304 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: ANTHONY M. LIVOTI, ESQ

11/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENELISHA, YAAKOV
Address: 3605 KENNSINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: RUIMY, SHIMON
Address: 5621 SW 56TH STREET
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CABESSA, ASI
Address: 2841 N OCEAN BLVD, APT 401
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P (X) Change () Addition
Name: RUIMY, SHIMON
Address: 5621 SW 56TH STREET
City-St-Zip: DAVIE, FL 33314

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: ASI CABESSA

VP

11/26/2008

Electronic Signature of Signing Officer or Director

Date