

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021441

FILED
Sep 11, 2007
Secretary of State

Entity Name: PRIME TIME MASTER TRADERS, INC.

Current Principal Place of Business:

3086 HAMBLIN WAY
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

3086 HAMBLIN WAY
WELLINGTON, FL 33414

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUGGAN, BERTRAM
9580 WEST ELM LANE
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUGGAN, DOUGLAS
Address: 3086 HAMBLIN WAY
City-St-Zip: WELLINGTON, FL 33414

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: DUGGAN, JENNIFER
Address: 3086 HAMBLIN WAY
City-St-Zip: WELLINGTON, FL 33414

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: JENNIFER DUGGAN

VP

09/11/2007

Electronic Signature of Signing Officer or Director

_____ Date