2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000046792

FILED Apr 27, 2003 Secretary of State

| Entity Na | me: PRIME M | OVERS, UNLIMITED, INC. | | | | | |
|---|--|----------------------------------|---|--|-------------------------------|---------|--|
| Current F | Principal Place | of Business: | New Principal Place of Business: | | | | |
| 7033 HAL LOXAHAT | L BLVD. 「CHEE, FL 334 | 170 | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | | |
| 7033 HAL LOXAHAT | L BLVD. 「CHEE, FL 334 | 170 | | | | | |
| FEI Number | El Number: 65-0523149 FEI Number Applied For () | | FEI Number Not Applicable () | | Certificate of Status Desired | () | |
| Name and | d Address of C | Current Registered Agent: | Name and Address of New Registered Agent: | | | | |
| SHAFER, 7033 HAL LOXAHAT | | 170 | | | | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing i | ts registered | office or registered agent, o | r both, | |
| SIGNATU | RE: | | | | | | |
| | Electror | ic Signature of Registered Age | ent | | Date | | |
| | | g Trust Fund Contribution(). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | LUPFER, JAME 10 FAIRWAY D | R. #307 | Title: Name: Address: City-St-Zip: | LUPFER, JAN 777 YAMATO | ROAD # 400 | | |
| Title: | PD (| Delete | Title | (|) Change () Addition | | |

Address: 79 CROSS BRANCHES
City-St-Zip: ACWORTH, GA 30101

Name:

Title: TD () Delete

Name: SHAFER, MARK
Address: 1300 W. HILLSBORO BLVD.
City-St-Zip: DEERFIELD BEACH, FL 33442

GOODWIN, HOWARD

Name: () Change () Hadition

Name: Address: City-St-Zip:

Title: TD (X) Change () Addition

Name: SHAFER, MARK
Address: 777 YAMATO RD
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK SHAFER TD 04/27/2003