


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000056579 1. Entity Name PRIME BEARING, INC.	
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Principal Place of Business 10390 LAKE VISTA CIRCLE BOCA RATON, FL 33498-6725	Mailing Address 10390 LAKE VISTA CIRCLE BOCA RATON, FL 33498-6725
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04182008 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3475393	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent KRASNOVE, BARBARA J ESQ. 5497 WILES RD., SUITE 206 COCONUT CREEK, FL 33073

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees ☐

U000000919755
05/14/08-80015-012 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KANOF, GEORGE 10390 LAKE VISTA CIRCLE BOCA RATON, FL 334986725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KANOF, BEVERLY 10390 LAKE VISTA CIRCLE BOCA RATON, FL 334986725
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara Kanof Vice President 4/21/08 561-477-9532*