## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## May 24, 2007 08:00 A Secretary of State DOCUMENT # P97000010750 1. Entity Name PRIME COURT REALTY & INVESTMENTS INC. Principal Place of Business Mailing Address 6299 WEST SUNRISE BLVD 5641 N.W. 13TH ST. LAUDERHILL FL 33313 **ROYAL PALM #201A** SUNRISE FL 33313 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, atc. 1st MOORE CR2E034 (10/06) City & Stato City & Stato Applied For 4. FEI Number 65-0721826 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo WILLIAMS, BENTLEY H Street Address (P.O. Box Number is Not Acceptable) 5641 N.W. 13TH STREET LAUDERHILL FL 33313 Zip Codo 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. THE ☐ Detete THE Addition WILLIAMS, BENTLEY H NAMI: NAME 5641 NW 13 STREET STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33313 CITY - ST - 7IP CITY - ST - ZIP 000000765276 change 05/31/07-80033-007 DILE Delete TITLE WILLIAMS, BENTLEY H NAME NAME: 5641 NW 13 STREET STREET ADDRESS SIREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP CITY-ST-ZIP Change Addition 1006 Delete TITLE TROTTER, MAXINE NAMI. NAME 11668 N N.W. 2ND DRIVE STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 CtTY - ST - 7IP CITY - ST - 7IP THIE ☐ Defete Change Addition NAME NAME STITLET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Defete ☐ Change Addition NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Addition HILL Delete THEF Change NAME NAME STREET ADDRESS STREET ADDRESS City - ST - ZIP CHY-ST-7IP

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or susple empoyered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attantion with an address, with all other like empowered.

SIGNATURE:

04/24/07

954-651-1893

FILED