

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073001

FILED
Apr 26, 2007
Secretary of State

Entity Name: PRIMETIME AMUSEMENTS OF SOUTH FLORIDA INC.

Current Principal Place of Business:

20725 NE 16TH AVENUE, SUITE A-24
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

5300 POWERLINE ROAD
SUITE 210
FORT LAUDERDALE, FL 33309

Current Mailing Address:

20725 NE 16TH AVE.
A-24
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

5300 POWERLINE ROAD
SUITE 210
FORT LAUDERDALE, FL 33309

FEI Number: 65-0941179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDFARB, DAVID
20725 NE 16TH AVENUE
A-24
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

GOLDFARB, DAVID
5300 POWERLINE ROAD
SUITE 210
FORT LAUDERDALE, FL 33309 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:

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLDFARB, DAVID
Address: 20725 NE 16TH AVE A-24
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: S () Delete
Name: LAINIE, SOLOMON
Address: 1059 NE 14TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOLDFARB, DAVID
Address: 5300 POWERLINE ROAD, SUITE 210
City-St-Zip: FORT LAUDERDALE, FL 33309

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID GOLDFARB

D

04/26/2007

Electronic Signature of Signing Officer or Director

Date