Amended

FILED

03 NOV -5 AM 11:12

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000117861

1. Entity Name
MAGNUS MEDIC-TECH, INC.

Principal Place of Business
7452 NW 8TH STREET
MIAMI, FL 33126

Mailing Address
7452 NW 8TH STREET
MIAMI, FL 33126

000024419410
11/05/03--01046--008 **61.25

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
7452 NW 8th STREET	7452 NW 8th STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FLORIDA	City & State: MIAMI, FLORIDA
Zip: 33126 Country: US	Zip: 33126 Country: US

4. FEI Number 65-1159308 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GALVEZ, CARLOS
7452 NW 8TH STREET
MIAMI, FL 33126

7. Name and Address of New Registered Agent

Name: MARY MENDOZA
Street Address (P.O. Box Number is Not Acceptable): 1725 West 60 STREET Apt. F-211
City: HIALEAH FL Zip Code: 33012

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GALVEZ, CARLOS 7452 NW 8TH STREET MIAMI, FL 33126	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VARONA, MARISOL 7452 NW 8TH STREET MIAMI, FL 33126	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, SECRETARY MARY MENDOZA 1725 W. 60 STREET Apt. F-211 HIALEAH, FL. 33012	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carlos Galvez, President [signature] VP 10/29/03 (305) 261-8618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #