2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086190

MARCICAL ODONATILIBIN/FOTMENTO INIC

FILED Mar 29, 2006 Secretary of State

Entity Nar	me: MAGICAL	GROW I H INVESTMENTS	INC.			
Current P	rincipal Place	of Business:	New Principal	New Principal Place of Business:		
3850 ST JOHNS PKWY SANFORD, FL 32771				501 GORDAN ST SANFORD, FL 32771		
Current Mailing Address:			New Mailing A	New Mailing Address:		
3850 ST JOHNS PKWY SANFORD, FL 32771				501 GORDAN ST SANFORD, FL 32771		
FEI Number:	20-1416760	FEI Number Applied For()	FEI Number Not Applicabl	e () Certificate of Statu	s Desired ()	
Name and Address of Current Registered Agent: Name				e and Address of New Registered Agent:		
DRAZEN, 156 HARS HEATHRO		US				
	named entity s e of Florida.	submits this statement for the	purpose of changing its re	gistered office or registered	agent, or both,	
SIGNATUR						
		ic Signature of Registered A	gent	Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () DRAZEN, DENN 3850 ST JOHNS SANFORD, FL	PKWY	Address: 501	(X) Change () Addition AZEN, DENNIS I GORDAN ST NFORD, FL 32771		

Title: () Delete DRAZEN, STEVEN Name: Address: 3850 ST JOHNS PKWY SANFORD, FL 32771 City-St-Zip:

Title: () Delete Name: DRAZEN, FRANK 3850 ST JOHNS PKWY Address: City-St-Zip: SANFORD, FL 32771

Title: () Delete DRAZEN, VALÉRIE Name: 3850 ST JOHNS PKWY Address: SANFORD, FL 32771 City-St-Zip:

Title: (X) Change () Addition

DRAZEN, STEVEN Name: Address: 501 GORDAN ST SANFORD, FL 32771 City-St-Zip:

Title: (X) Change () Addition

Name: DRAZEN, FRANK Address: 501 GORDAN ST City-St-Zip: SANFORD, FL 32771

Title: (X) Change () Addition

DRAZEN, VALÉRIE Name: Address: 501 GORDAN ST SANFORD, FL 32771 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: VALERIE DRAZEN 03/29/2006 S