

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000116659

**FILED**  
**May 05, 2010**  
**Secretary of State**

**Entity Name:** MAGICOLORING DESIGNER & DECORATOR INC

**Current Principal Place of Business:**

2411 NW 184 TERR  
PEMBROOKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

2411 NW 184 TERR  
PEMBROOKE PINES, FL 33029

**New Mailing Address:**

FEI Number: 20-5599220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POMARES, YOHANNA  
2411 NW 184 TERR  
PEMBROOKE PINES, FL 33029 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARTINEZ, LEDYAN  
Address: 2411 NW 184 TERR  
City-St-Zip: PEMBROOKE PINES, FL 33029

Title: V  
Name: POMARES, YOHANNA  
Address: 2411 NW 184 TERR  
City-St-Zip: PAMBROOKE PINES, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: LEDYAN MARTINEZ

P

05/05/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date