2002 UNIFORM BUSINESS REPORT (UBR)

Apr 16, 2002 8:00 am Secretary of State **DOCUMENT #** P95000043044 1. Entity Name 04-16-2002 90146 049 ***150.00 MAGNUM TWO, INC. Principal Place of Business Mailing Address 13366 48 TRAIL S 13366 48 TRAIL S DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0582759 Not Applicable Zip Country \$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 Name WELLS, ROBERT D Street Address (P.O. Box Number is Not Acceptable) 13366 48 TRAIL SOUTH **DELRAY BEACH FL 33445** City Zip Code FL 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. **SIGNATURE** 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (9/01 TITLE ☐ Delete Change ☐ Addition WELLS, ROBERT D NAME NAME 13366 48 TRAIL SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DELRAY BEACH FL 33445** CITY-ST-ZIP TITL F ☐ Defete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal ef

SIGNATURE:

changed, or on an attachment wit

address, with all other like empowered.

Daytime Phone #