

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000073791

FILED  
Jan 30, 2007  
Secretary of State

Entity Name: MAGNUM ASSET MANAGEMENT, INC.

**Current Principal Place of Business:**

2875 NE 191 ST  
900  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

2875 NE 191 ST  
900  
AVENTURA, FL 33180 US

**New Mailing Address:**

FEI Number: 65-0787090      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BLOCK, LARA  
19904 NE 19TH PLACE  
MIAMI, FL 33179 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: METZ, CHERISE  
Address: 19470 AMBASSADOR CT  
City-St-Zip: NORTH MIAMI, FL 33179

Title: D ( ) Delete  
Name: BLOCK, LARA  
Address: 19904 N.E. 19 PLACE  
City-St-Zip: MIAMI, FL 33179

Title: P ( ) Delete  
Name: FRIEDLAND, DAVID  
Address: 917 MANATEE WAY  
City-St-Zip: HOLLYWOOD, FL 33019

Title: D ( ) Delete  
Name: FRIEDLAND, BRETT  
Address: 21019 NE 38 AVE.  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: LARA BLOCK

DIR

01/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date