

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000046055

**Entity Name:** MAG 2U INC.

**Current Principal Place of Business:**

8625 NW 8 STREET, APT #419  
MIAMI, FL 33126

**Current Mailing Address:**

8625 NW 8 STREET, APT #419  
MIAMI, FL 33126

**FEI Number:** 46-2881182

**Certificate of Status Desired:** No

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

GATO, HECTOR  
8625 NW 8 STREET, APT #419  
MIAMI, FL 33126 US

*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

**Officer/Director Detail :**

Title PD  
Name GATO, HECTOR  
Address 8625 NW 8 STREET, APT #419  
City-State-Zip: MIAMI FL 33126

*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:** HECTOR GATO

**PRESIDENT**

**04/08/2015**

Electronic Signature of Signing Officer/Director Detail

Date