

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000042015

**Entity Name:** MAGNECORP INC

**Current Principal Place of Business:**

3660 NORTH STATE RD 7  
LAUDERDALE LAKES, FL 33319

**Current Mailing Address:**

3660 NORTH STATE RD 7  
LAUDERDALE LAKES, FL 33319

**FEI Number:** 81-2635211

**Certificate of Status Desired:** No

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

THE JULIEN LIVING TRUST DATED MAY 4TH 2016  
401 EAST LAS OLAS BLVD  
130558  
FORT LAUDERDALE, FL 33301 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	P
Name	THE JULIEN LIVING TRUST DATED MAY 4TH 2016
Address	401 EAST LAS OLAS BLVD 130558
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	P
Name	JULIEN, VALERIE
Address	401 EAST LAS OLAS BLVD 130558
City-State-Zip:	FORT LAUDERDALE FL 33301

*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:** VALERIE JULIEN

P

09/12/2022

Electronic Signature of Signing Officer/Director Detail

Date