2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 452062

FILED Mar 28, 2008 Secretary of State

Entity Name: MAGDAMESA CORPORATION						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
8501 SW 8 MIAMI, FL	33143 US					
Current M	lailing Addr	ess:	New Maili	New Mailing Address:		
8501 SW 8 MIAMI, FL	36TH COUR 33143 US					
FEI Number: 59-1582954 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
STEINLAG 8501 SW 8 MIAMI, FL	BETH COURT					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU	RE:					
	Electro	onic Signature of Registered A	gent		Date	
Election Car	npaign Financi	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	STEINLAGE,	6TH STREET	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	T (MESA, ANTO 621 SW 87 C MIAMI, FL 33	OURT	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	S YAMUNI, STE 8501 SW 86 MIAMI, FL 33	COURT	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MESA, GEOF 12320 SW 47 MIAMI, FL 33	ST STREET	Title: Name: Address: City-St-Zip:	D (MCNIGHT, CI 14311 83 PL SEMINOLE, F	N	
Title:	D (X) Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: IRIS STEINLAGE **PDTE** 03/28/2008

MCKNIGHT, CLARA,

SEMINOLE, FL 33776 US

14311 83PL N

Name:

Address:

City-St-Zip: