

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 05, 2007
Secretary of State**

DOCUMENT# 707205

Entity Name: FORT LAUDERDALE MAGIC SOCIETY, INC.

Current Principal Place of Business:C/O JOE PERLMUTTER
2515 BLUE SAGE AVENUE
COCONUT CREEK, FL 33063**New Principal Place of Business:**C/O MASON LEVY
11811 ROYAL PALM BLVD #204
CORAL SPRINGS, FL 33065**Current Mailing Address:**C/O JOE PERLMUTTER
2515 BLUE SAGE AVENUE
COCONUT CREEK, FL 33063**New Mailing Address:**C/O MASON LEVY
11811 ROYAL PALM BLVD #204
CORAL SPRINGS, FL 33065

FEI Number: 65-0010645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:PERLMUTTER, JOE
2515 BLUE SAGE AVENUE
COCONUT CREEK, FL 33063 US**Name and Address of New Registered Agent:**LEVY, MASON
11811 ROYAL PALM BLVD #204
CORAL SPRINGS, FL 33065 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: MASON SCOTT LEVY

09/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: LUCAS, WILLIAM
Address: 9752 MAJESTIC WAY
City-St-Zip: BOYNTON BEACH, FL 33437Title: VP () Delete
Name: HIRSCHKOWITZ, NORMAN
Address: 2523 BLUESAGE AVE
City-St-Zip: COCONUT CREEK, FL 33063Title: DS () Delete
Name: PERLMUTTER, JOE
Address: 2515 BLUE SAGE AVENUE
City-St-Zip: COCONUT CREEK, FL 33063Title: DT () Delete
Name: LABUSH, PHIL
Address: 9360 NW 39ST
City-St-Zip: SUNRISE, FL 33381Title: D () Delete
Name: SHELLY, MICHAEL
Address: 9283 VISTA DEL LARGO #37-C
City-St-Zip: BOCA RATON, FL 33428Title: D () Delete
Name: HOROWITZ, MARK
Address: 5719 NW 79TH WAY
City-St-Zip: PARKLAND, FL 33067**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DS (X) Change () Addition
Name: LEVY, MASON
Address: 11811 ROYAL PALM BLVD #204
City-St-Zip: CORAL SPRINGS, FL 33065Title: () 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MASON SCOTT LEVY

DS

09/05/2007

Electronic Signature of Signing Officer or Director

Date