## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Jul 15, 2008 8:00 am Secretary of State **DOCUMENT #834978** 07-15-2008 90061 046 \*\*\*550.00 MAG PROPERTIES, INC. Mailing Address Principal Place of Business MILLOSON 10 PLEASANT ST. C/O B. A. GROVES 10 PLEASANT ST. SUITE 468 **SUITE 468** HARWICHPORT, MA 02642 HARWICHPORT, MA 02642 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06052008 CR2E034 (12/06) Chg-P City & State 4. FEI Number Applied For City & State 13-2828417 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET **SUITE 105** TALLAHASSEE, FL 32301 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Due by September 12, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTS ☐ Delete TITLE ☐ Change Addition TITLE GROVES, BENJAMIN A. NAME STREET ADDRESS 10 PLEASANT ST. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HARWICH PORT, MA 02646 ■ Addition ☐ Delete ☐ Change TITLE TITLE GERARD, PHILIPPA G NAME NAME STREET ADDRESS 109 BANK STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10014 CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE OUTERBRIDGE, AMANDA F.T. NAME NAME STREET ADDRESS COVER DR. FAIRYLANDS STREET ADDRESS CITY-ST-ZIP PEMBROKE, BM HM06 CITY-ST-ZIP Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

ATTACHMENT 40110955 BENJAMIN A. YMONES

MAG PROPORTIOS INC

PO BOX 468

HARWICKFORT MA 02646

TULY 11 2008

DOCUMENT (# 834978) AFTOR SEVERAL ATTEMPTS To REGISTER COMPANY ELECTRUNIALE I WAS FOREGOD TO GIVE UP. THE PROBLEM APPEARS To be THAT THE COMPANY HAS ONE OFFICER Living OVERSCAJ YOUR PROGRAM REFUSED TO ACCEPT THE ZIP PODE BM HMO6- I HAD WO TROUBLE REGISTERIAL THE COMPANY ELECTRONICALLY IN DETAWARE TO I TRIED TO UN FORTUNE A TELY I TRIED TO PRGISTER ONLINE THE DAY BEFORE THE MAY 125 DOWNLINE BY THE TIME

I DISCOVERD MY INABILITY TO REGISTOR THE COMPANY ON LINE IT WAS AFTOR MAY 120208 -OVER