

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90038 030 ***150.00

DOCUMENT # F01000003011

1. Entity Name
MAGICAL ATTRACTIONS, INC.

Principal Place of Business
**4157 CHAIN BRIDGE ROAD
 FAIRFAX VA 22030**

Mailing Address
**4157 CHAIN BRIDGE ROAD
 FAIRFAX VA 22030**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
54-2036136

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PENSON, ALBERT
 2810 REMINGTON GREEN CIRCLE
 TALLAHASSEE FL 32308**

Name **N/A**
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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.

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00** May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **CD**
 STREET ADDRESS **REITHOFFER, RICHARD H**
 CITY-ST-ZIP **9022 WIGGINS ROAD
 GIBSONTON FL 33534** ☐ Delete

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **V**
 STREET ADDRESS **PUGH, ROBERT**
 CITY-ST-ZIP **9022 WIGGINS ROAD
 GIBSONTON FL 33534** ☐ Delete

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **ST**
 STREET ADDRESS **REITHOFFER, MARIANNE**
 CITY-ST-ZIP **9022 WIGGINS ROAD
 GIBSONTON FL 33534** ☐ Delete

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
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 STREET ADDRESS
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 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Richard H. Reithoffler, Pres.** 4/25/02
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/01)