2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

F97000003524 DOCUMENT

1. Entity Name

Principal Place of Business

356 PRESTWICK CR

MAGAZINE GRAPHICS INC.



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90193 038 ***150.00

02-24-2003 90193 038 *****

PALM BEACH GARDENS FL 33418 US 2. Principal F Suite, Apt WE HAVE MOVED		WE HAVE MOVED Magazine Graphics Inc 154 Coventry Place Palm Beach Gardens, FL 33418						
Magazine Graphics Inc					☐ CHECK HERE IF MAKING CHANGES			
City & Sta	154 Coventry Place Palm Beach Gardens, FL	33418		4.	FEI Number 22-2411021		pplied For ot Applicable	
Zip			Country	5.	Certificate of Status Desired	\$8.75 Ad		
		7. Name and Address of New Registered Agent						
WOOD D	AVAIOND O		Name		•			
	AYMOND C		Street A	Street Address (P.O. Box Number is Not Acceptable)				
	ESTWICK CIRCLE			.				
PALM BEA	ACH GARDENS FL 33418						ľ	
			City			FL Zip Cod	le	
SIGNATURE	named entity submits this statement fions of registered agent. Signature, typed or printed name of registered agen					I am familiar with,	and accept	
-		t and title if applicable. (NOT	E: Registered Agent signatu	re required when r	einstating) D	PATE		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	of State			Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
10.	OFFICERS AND	DIRECTORS	11.	AE	L DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE	PO	☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS	WOOD, RAYMOND C 856-4 PRESTWICK CIRCLE		NAME					
CITY-ST-ZIP	PALM BEACH GARDENS FL		STREET ADDRES CITY-ST-ZIP		AVE MOVED			
	1. C.		TITLE		ine Graphics Inc ventry Place			
NAME	• , .	€ Detete	NAME		Beach Gardens, FL 33418	☐ Change	☐ Addition	
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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 teport 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #