2000 UNIFORM BUSINESS REPORT (UBR)

DOCÚMENT # G11876 Aug 22, 2000 8:00 am Secretary of State 1. Entity Name MAGIN MANAGEMENT CORPORATION 08-22-2000 90219 022 ***150.00 Mailing Address Principal Place of Business PO BOX 811661 10124 EL CABALLO COURT DELRAY BEACH FL 33446 BOCA RATON FL 33481-1661 2. Principal Place of Business 3. Mailing Address 9370 AEGEAN DRIVE DRIVE 9370 AEGEAU Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2263423 BOCA RATON FLA RATON FLA. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired DRANGE Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HARLAN, BRUCE M. Street Address (P.O. Box Number is Not Acceptable) 110 TURNER ST. CLEARWATER FL 33516 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9:-This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000. Feé will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME MAGIN. CHARLES A. STREET ADDRESS STREET ADDRESS 9370 AEGEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33496** ☐ Change ☐ Addition ☐ Delete TITLE TITLE MAGIN, JANET P. NAME NAME STREET ADDRESS STREET ADDRESS 9370 AEGEAN DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33496** ☐ Change -Addition Delete TITI F 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 ☐ Addition ☐ Change ☐ Delete TITLE TITH F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 any address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED THAT OF SIGNING OFFICER OR DIRECTOR

MACHARLES A. MAGIN PRES. 8/10/01 \$ 561-470-7997

Daytime Phone #

GENTLEMEN

AS YOU HAVE NOTICED, THE 2000 UNIFORM
BUSINESS REPORT HAS BEEN SUBMITTED AT A
LATE DATE. SENDING THE REPORT ON A LATE
DATE WAS BEYOND MY CONTROL.

I CALLED YOUR 800 PHONE NUMBER TO FIND OUT WHAT I SHOULD DO, SINCE MY REPORT WAS LATE GETTING TO ME. T EXPLAINED TO PARTY THAT ANSWERED AND I WAS TOLD TO SEND A CHECK, PUT THE CORRECT PODREST ON THE FORM " SEND A LETTER EXPLAIMINE, TO THE BEST OF MY KNEWLERGE WHAT HAD HAPPENED THAT MADE THE REPORT ARRIVE TO ME AT A LATE DOOF

THE FORM WAS MAILLED TO S.O.BOX 8)166) AS MY

MAILING APPRESS. THE P.O.BOX-WAS CAN-FECO-THE

LATER PART OF 1999, THE PRINCIPAL PLACE OF BUSINESS

AT 10124 FL CABALLO COURT, DELRAY BCH, FLA. 33446

HIAD NIT BEEN OUR APPRESS SEPAIN. 2 YRS.

T DID SUBMIT A FORWARDING APPRESS. MOST OF

MY MAIL DID SHOW UP AT MY NEW APPRESS. THE

REASON FOR THE LATE ARRIVAL OF THE REPORT IS UNKNOWN.

THE POST OFFICE COLD NOT GIVE ME AN ARSWER. I WAS TOLD

THAT THIS HAPPEN WHEN CHANGING A ADDRESS- BUT NOT TO OFFIFE

CHADIET A MACON