FILED 2006 FOR PROFIT CORPORATION Apr 05, 2006 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # G43599** t. Entity Name MAGDA AUNON SCHOOL OF BALLET, INC. Mailing Address Principal Place of Business C/O MAGDA AUNON C/O MAGDA AUNON 508 NE 43RD STREET OAKLAND PARK, FL 33334 508 NE 43RD STREET OAKLAND PARK, FL 33334 CR2E034 (11/05) No Chg-P 03012006 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2313321 \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent

AUNON, MAGDA 1556 E. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33334			DO NOT WRITE IN THIS SPACE		
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, typed or printed reims of registated agent and title it applicable. (NOTE Registered Agent signature required when reinstalling) OATE					
FILE NOWIS FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finar Trust Fund Contribution.	icing	\$5.00 May Be Added to Feas	000000493012 04/19/06-80086-023 150.00
10.	OFFICERS AND DIREC	TORS			
title Name Street address City-SI-ZIF	DP AUNON, MAGDA 508 NE 43RD STREET DAKLAND PARK, FL		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:			
TITLE NAME STREET ADDITIESS CITY-ST-ZIP					
TITUE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 contraction or the reporter to place in the second statute and that my produce the same legal effect as if made under oath, that I am an officer or director of the contraction or the reporter of the place of the produce that my produce the same agrees in Block 11 or Block 11 if					

of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Bjock 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Applied For

Not Applicable