

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H52976

Entity Name: MAGIC IMAGE, INC.

FILED
Feb 11, 2009
Secretary of State

Current Principal Place of Business:

1810 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

1810 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 59-2518360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLLYSON, JAMES H.
#6 VIA LAGO
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

ROLLYSON, JAMES H.
#6 VIA LAGO
BOYNTON BEACH, FL 33435 US

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: JAMES H. ROLLYSON

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: WOLFF, CARLA,
Address: 1810 FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL

Title: PD () Delete
Name: ROLLYSON, JAMES H.,
Address: 1810 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL

Title: STD () Delete
Name: ROLLYSON, GENEVIEVE,
Address: 1810 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: TOWNSEND, RHONDA
Address: 1429 CARIBBEAN ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: V-PR (X) Change () Addition
Name: INGHAM, JAMI
Address: 5076 MADISON ROAD
City-St-Zip: DELRAY BEACH, FL 33484

Title: SECT (X) Change () Addition
Name: PASSANTE, JULIE
Address: 5161 SUNRISE BLVD
City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHONDA TOWNSEND

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date