

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009605

Entity Name: MAGNACENT, LLC

FILED
Jan 30, 2008
Secretary of State

Current Principal Place of Business:

1613 NW 136TH AVE, SUITE 100U
SUNRISE, FL 33323

New Principal Place of Business:

1613 NW 136TH AVE, SUITE 100
SUNRISE, FL 33323

Current Mailing Address:

1613 NW 136TH AVE, SUITE 100U
SUNRISE, FL 33323

New Mailing Address:

1613 NW 136TH AVE, SUITE 100
SUNRISE, FL 33323

FEI Number: 20-0690542

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APPLEBY, HOMER P
6001 BROKEN SOUND PARKWAY, SUITE 200
SABRE CENTRE II
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: KEVIN R. ROBERTS, PRESIDENT

01/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JI, NIUNIU
Address: 6001 BROKEN SOUND PARKWAY, SUITE 200
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JI, NIUNIU
Address: 1613 NW 136TH AVE., STE. 100
City-St-Zip: SUNRISE, FL 33323

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NIUNIU JI

MGRM

01/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date