2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015085

Entity Name: MAGIC 3G LLC

VISIOTEX SA,

420 LINCOLN ROAD

MIAMI BEACH, FL 33139 US

Name:

Address:

City-St-Zip:

FILED Jul 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 420 LINCOLN ROAD 380 MIAMI BEACH, FL 33139 **New Mailing Address: Current Mailing Address:** PO BOX 403575 420 LINCOLN ROAD 380 MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33139 US FEI Number: 20-5857971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DURAND ARFI, SANDRINE DURAND ARFI, SANDRINE 3747 PRAIRIE ÁVENUE 420 LINCOLN ROAD MIAMI BEACH, FL 33140 US 380 MIAMI BEACH, FL 33139 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: SADRIE DURAND-ARFI 07/23/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GOSPIC, ZORAN Name: Name: Address: 420 LINCOLN ROAD Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: VIRGINIA MEDIA LTD, Name: Address: 420 LINCOLN ROAD Address: City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: SANDRINE DURAND-ARFI MRS. 07/23/2007