

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000043676

Entity Name: MAG FLORIDA, L.L.C.

FILED  
Apr 12, 2011  
Secretary of State

**Current Principal Place of Business:**

C/O REID MAGID; 220 CELESTIAL WAY  
#4  
JUNO BEACH, FL 33408

**New Principal Place of Business:**

C/O REID MAGID; 220 CELESTIAL WAY  
#4  
JUNO BEACH, FL 33408

**New Mailing Address:**

MAG FLORIDA, LLC  
PO BOX 30939  
PALM BEACH GARDENS, FL 33420

FEI Number: 20-4811894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZANE, JEFFREY P  
4100 RCA BOULEVARD  
SUITE 110  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MAGID, REID S  
Address: 220 CELESTIAL WAY (#4)  
City-St-Zip: JUNO BEACH, FL 33408

Title: MGRM  
Name: MAGID, STANLEY A  
Address: 220 CELESTIAL WAY (#4)  
City-St-Zip: JUNO BEACH, FL 33408

Title: MGRM  
Name: MAGID, ADAM J  
Address: 220 CELESTIAL WAY (#4)  
City-St-Zip: JUNO BEACH, FL 33408

I hereby 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: REID S. MAGID

MGRM

04/12/2011

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