

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L31128

Entity Name: MAGIAN, INC.

FILED
Feb 16, 2009
Secretary of State

Current Principal Place of Business:

18901 N.E. 29TH AVENUE
SUITE 100
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

18901 N.E. 29TH AVENUE
SUITE 100
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 65-0163352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC.
18901 N.E. 29TH AVENUE
SUITE 100
AVENTURA, FL 33180 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLASSMAN, GIANNA
Address: 44 CHARLES ST, W #901
City-St-Zip: TORONTO, ONTARIO CANADA, OC

Title: ST () Delete
Name: GLASSMAN, MAX
Address: 44 CHARLES ST W #901
City-St-Zip: TORONTO, ONTARIO CANADA, OC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLASSMAN, GIANNA
Address: 44 CHARLES ST, W #4511
City-St-Zip: TORONTO, ONTARIO CANADA, ON M4Y1R8 OC

Title: ST (X) Change () Addition
Name: GLASSMAN, MAX
Address: 44 CHARLES ST W #4511
City-St-Zip: TORONTO, ONTARIO CANADA, ON M4Y1R8 OC

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: GIANNA GLASSMAN

P

02/16/2009

Electronic Signature of Signing Officer or Director

Date