FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 13 1998 8:00am Secretary of State

1. Corporatio	MENT # L68081 AGE MAGIE, INC.	(3)			
Principal Place of Business % STEVEN M. CAROTHERS 1612 W. CAMINO DEL RIO		Mailing Address 1612 W. CAMINO DEL RIO VERO BEACH FL 32963-2214			
VERO BEACH	1 FL 32963-2214	U\$		DO NOT WRITE IN THI 3. Date Incorporated or Qualified 04/24/1990	S SPACE
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite Ant	#	26		65-0188724	Not Applicable
Suite, Apt.	#, Θ IC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z ip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the operation Property Tax due June 30.	current year Intangible
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
	ROTHERS, STEVEN M.		81 Name		
	12 W. CAMINO DEL RIO		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
VE:	RO BEACH FL 32963		83		
			84 City	F	85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.0502 registered agent, or both, in the State c im familiar with, and accept the obligat	and 607.1508, Florida Statu If Florida Such change was ions of, Section 607.0505, Fl	tes, the above-named corp authorized by the corporal lorida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
SIGNATURE					
10	Signature typed or printed name of regeneral agent OFFICERS AND		IE: Registered Agent signature requi		
12.	D CATIOLIS AND	DELETE	13. 1.1 THE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	CAROTHERS, STEVEN M.		1.2 NAME		
STREET ADDRESS	1612 W. CAMINO DEL RIO		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CHY-ST-ZIP		
TITLE	D	☐ DELETE	2 1 1)TLE		Change Addition
NAME	ROBERTS, GAIL J.		22 NAME		
STREET ADDRESS	1612 W. CAMINO DEL RIO		2 3 STREET ADDRESS		
CITY-S1-ZiP	VERO BEACH FL	D britze	2 4 CITY-ST-7IP		
TITLE NAME		L DELETE	31 TITLE		Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		Í
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 101.6		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 THLE		Change Addition
NAME			5.2 NAME		+
STREET ADDRESS			5.3 STREET ADDRESS		İ
CITY-ST-ZIP		Driese	5.4 CITY-ST-7IP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME STORET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		en, a legar er a le rren e n er er er en er 	6.4 CITY-ST-ZIP	0	

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on au diagramment with an addition.