

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # M61967 (9)

1. Corporation Name

MAJIC MANAGEMENT CORPORATION

Principal Place of Business

C/O RICHARD WASERSTEIN
740-71ST STREET
MIAMI BEACH FL 33141

Mailing Address

C/O RICHARD WASERSTEIN
740-71ST STREET
MIAMI BEACH FL 33141-3022

2. Principal Place of Business

21 1111 HANE CONCOURSE

Suite, Apt. #, etc.

22 SUITE 610

City & State

23 BAY HARBOR

Zip

24 33154

Country

25 FL

2a. Mailing Address

26 P.O. Box 402188

Suite, Apt. #, etc.

27

City & State

28 MIAMI BEACH

Zip

29 33140-0188

Country

30 FL

3. Date Incorporated or Qualified

11/04/1987

3a. Date of Last Report

04/08/1996

4. FEI Number

65-0011094

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

WASERSTEIN, RICHARD
913 NORMANDY DR. (71ST. ST.)
MIAMI BEACH FL 33141

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12. TITLE PVST ☐ DELETE

NAME JAJMAN, MILTON

STREET ADDRESS 740-71ST STREET

CITY-ST-ZIP MIAMI BEACH FL

TITLE SD ☐ DELETE

NAME RAJMAN, MILTON

STREET ADDRESS 740-71ST STREET

CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVST ☒ Change ☐ Addition

1.2 NAME RAJMAN, MILTON

1.3 STREET ADDRESS 1111 HANE CONCOURSE SUITE 610

1.4 CITY-ST-ZIP BAY HARBOR FL 33154

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME RAJMAN, MILTON

2.3 STREET ADDRESS 1111 HANE CONCOURSE SUITE 610

2.4 CITY-ST-ZIP BAY HARBOR FL 33154

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby 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 supplemental 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 an attachment with an address.

SIGNATURE:

SIGNATURE: [Signature]

6/24/97 205 868 8285

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