

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 07, 2008  
Secretary of State

DOCUMENT# N01000008269

Entity Name: MAGISTERIUM, INC.

**Current Principal Place of Business:**

10951 SW 64TH ST.  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

10951 SW 64TH ST.  
MIAMI, FL 33173

**New Mailing Address:**

FEI Number: 02-0559055      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RAMOS, LUCILO  
5201 BLUE LAGOON DRIVE  
SUITE 909  
MIAMI, FL 33126 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DE AVILA, GERARDO  
Address: 10951 SW 64TH ST.  
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete  
Name: LOPEZ, EMILIO  
Address: 8495 SW 56TH STREET  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: PEREDA, MANUEL  
Address: 9621 SW 77TH ST.  
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete  
Name: MERIDA, OSCAR  
Address: 731 NE 3RD PL.  
City-St-Zip: HIALEAH, FL 33010

Title: D ( ) Delete  
Name: CUBA, CARLOS  
Address: 6031 SW 95TH CT.  
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete  
Name: RAMOS, LUCILO JR  
Address: 5201 BLUE LAGOON DRIVE, SUITE 909  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL PEREDA

D

05/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date