

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008269

FILED  
Apr 21, 2010  
Secretary of State

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 ( )

**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:**

RAMOS, LUCILO  
1030 SOUTH GREENWAY DR  
CORAL GABLES, FL 33134 US

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:

04/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: GERARDO DE AVILA

PRES

04/21/2010

Electronic Signature of Signing Officer or Director

Date