

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28671

FILED
Jul 07, 2009
Secretary of State

Entity Name: MAJIC CHILDREN'S FUND, INC.

Current Principal Place of Business:

20450 NORTHWEST SECOND AVENUE
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

20450 NORTHWEST SECOND AVENUE
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 65-0074970 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:

Name and Address of New Registered Agent:

GONZALEZ, ALINA
20450 NORTHWEST SECOND AVENUE
MIAMI, FL 33169 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLINS, DENNIS
Address: 11360 SHADY LANE
City-St-Zip: PALMNTATION, FL 33325

Title: V () Delete
Name: SHAW, RICK
Address: 20450 NORTHWEST 2ND AVENUE
City-St-Zip: MIAMI, FL

Title: S (X) Delete
Name: HAMILTON, BOB
Address: 23450 N.W. 2ND AVENUE
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: ESTOPINAN, CONNIE
Address: 20450 NW 2ND AVE
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: GONZALEZ, ALINA I.
Address: 2234 SW 132 CT.
City-St-Zip: MIAMI, FL 33175

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:

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: ALINA I. GONZALEZ

D

07/07/2009

Electronic Signature of Signing Officer or Director

Date