

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005282

FILED
Feb 09, 2006
Secretary of State

Entity Name: INTERNATIONAL BROTHERHOOD OF MAGICIANS, RING 45, INC.

Current Principal Place of Business:

8961 SW 150TH CT CIR W
MIAMI, FL 33196 US

New Principal Place of Business:

Current Mailing Address:

8961 SW 150TH CT CIR W
MIAMI, FL 33196 US

New Mailing Address:

FEI Number: 65-0537325 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEL VECCHIO, RICHARD A
8961 SW 150TH CT CIR W
MIAMI, FL 33196 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: CODORNIU, OLIVER
Address: 12880 SW 60 ST.
City-St-Zip: MIAMI, FL 33183

Title: VPD () Delete
Name: BERDASCO, LOU
Address: 1408 BRICKELL BAY DR., #410
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: DEL VECCHIO, RICK
Address: 8961 SW 150 W. CT. CIRCLE
City-St-Zip: MIAMI, FL 33196

Title: TD () Delete
Name: SOUSA, JOSE
Address: P.O. BOX 960206
City-St-Zip: MIAMI, FL 33296

Title: SAD () Delete
Name: SILVER, HILL
Address: 7860 SW 20 STREET
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERDASCO, LOU
Address: 1408 BRICKELL BAY DR. # 410
City-St-Zip: MIAMI, FL 33131

Title: VPD (X) Change () Addition
Name: SOUSA, JOSE
Address: 6261 SW 158 CT.
City-St-Zip: MIAMI, FL 33193

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

Title: TD (X) Change () Addition
Name: SILVER, JEFF
Address: 3401 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RICK DEL VECCHIO

SD

02/09/2006

Electronic Signature of Signing Officer or Director

Date