

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000490

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: FLORIDA MAGICIANS ASSOCIATION, INC.

## Current Principal Place of Business:

C/O HAROLD GREENBAUM  
7760 NW 50 ST. #301  
LAUDERHILL, FL 33351

## New Principal Place of Business:

C/O MARIA IBANEZ  
12791 SW 216 TERRACE  
MIAMI, FL 33170

## Current Mailing Address:

C/O HAROLD GREENBAUM  
7760 NW 50 ST. #301  
LAUDERHILL, FL 33351

## New Mailing Address:

C/O MARIA IBANEZ  
12791 SW 216 TERRACE  
MIAMI, FL 33170

FEI Number: 94-1687665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREENBAUM, HAROLD  
7760 NW 50 STREET  
# 301  
LAUDERHILL, FL 33351 US

## Name and Address of New Registered Agent:

IBANEZ, MARIA  
12791 SW 216 TERRACE  
MIAMI, FL 33170 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: MARIA IBANEZ

01/07/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: IBANEZ, MARIA  
Address: 10225 SW 37TH ST.  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: DEL VECULIE, RICHARD  
Address: 8961 SW 150TH  
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete  
Name: GREENBAUM, HAROLD  
Address: 7760 NW 50 STREET  
City-St-Zip: LAUDERHILL, FL 33351

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: IBANEZ, MARIA  
Address: 10225 SW 37TH ST.  
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change ( ) Addition  
Name: DEL VECCHIO, RICHARD  
Address: 8961 SW 150TH  
City-St-Zip: MIAMI, FL 33196

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 Section 119.07(3)(i), 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: MARIA IBANEZ

PRES

01/07/2005

Electronic Signature of Signing Officer or Director

Date