



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

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| DOCUMENT # P00000025088 1. Entity Name MAGNA ENTERPRISES B2B, INC. |  |
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| Principal Place of Business 7440 SW 50TH TERR., SUITE 104 MIAMI, FL 33155 | Mailing Address PO BOX 557631 MIAMI, FL 33255-7631 |
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DO NOT WRITE IN THIS SPACE



04282008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 65-0993575 | Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

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|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent CASTRILLO, EDGAR 7440 SW 50TH TERR., SUITE 104 MIAMI, FL 33155 | DO NOT WRITE IN THIS SPACE |
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8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | DATE 05/30/08-80034-004 158.75 |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD CASTRILLO, EDGAR 7440 SW 50TH TERR., SUITE 104 MIAMI, FL 33155 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **EDGAR CASTRILLO, PRESIDENT 4-25-08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #