2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040958

City-St-Zip:

VAUD, SW

Entity Name: MAGNITUDE INCORPORATED

FILED Jul 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11730 SHIPWATCH DRIVE, #306 LARGO, FL 33774 **Current Mailing Address: New Mailing Address:** 11730 SHIPWATCH DRIVE, #306 451 CENTRAL PARK DRIVE LARGO, FL 33774 LARGO, FL 33771 FEI Number: 65-1015675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHWOB, GILBERT DAVENPORT, DOUGLAS 11730 SHIPWATCH DRIVE, #306 451 CENTRAĹ PARK DRIVE LARGO, FL 33774 LARGO, FL 33771 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: DOUGLAS DAVENPORT 07/10/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SCHWOB, GILBERT Name: Name: 11730 SHIPWATCH DRIVE SUITE 306 Address: Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SCHWOB, LAURENT Name: **TRELEX 1270** Address: Address: VAUD, SW City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SCHWOB, FRANGOIS Name: Name: TRFLEX 1270 Address: Address:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GILBERT SCHWOB D 07/10/2007