

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90069 031 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P00000062571**
1. Entity Name

MAGYT'S, INC ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1530 NW 124 TERR

Suite, Apt. #, etc.

20308

City & State

SUNRISE FL

Zip

33323

Country

3. Mailing Address

1530 NW 124 TERR.

Suite, Apt. #, etc.

20308

City & State

SUNRISE FL

Zip

33323

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1019306

5. Certificate of Status Desired ☐

\$8.75

Fee Required

7. Name and Address of Current Registered Agent

Name **MAURICIO GUERRERO**

Street Address, if (), Fax Number (), Not Acceptable

1530 NW 124TH TERRACE

20308

City **SUNRISE**

FL

33323

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Angela Guerrero

Signature, typed or printed name of registered agent, and title if applicable.

NOTE: The registered agent must be a resident of the State of Florida.

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing ()

\$5.00

State Fee

11. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MAURICIO GUERRERO
STREET ADDRESS	1530 NW 124TH # 20308
CITY-STATE-ZIP	SUNRISE FL 33323
TITLE	VPD
NAME	ANGELA GUERRERO
STREET ADDRESS	1530 NW 124TH # 20308
CITY-STATE-ZIP	SUNRISE FL 33323
TITLE	SD
NAME	RUTH MARY E DE GUERRERO
STREET ADDRESS	1530 NW 124TH # 20308
CITY-STATE-ZIP	SUNRISE FL 33323
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
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STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(b), Florida Statutes. Further, I am the owner of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 88, Florida Statutes, and that my name appears on the attachment with an address, with all other like empowered.

SIGNATURE:

Angela Guerrero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR