

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000014234

Entity Name: MAGNISYSTEM, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

16300 NE 19 AVENUE
STE C
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

5345 NW 158 TERRACE
STE 301
MIAMI, FL 33014

Current Mailing Address:

16300 NE 19 AVENUE
STE C
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

5345 NW 158 TERRACE
STE 301
MIAMI, FL 33014

FEI Number: 65-1073257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, FERNANDO
16300 NE 19 AVENUE
STE C
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

SARMIENTO, RICARDO
5345 NW 158 TERRACE
STE 301
MIAMI, FL 33014 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: RICARDO SARMIENTO

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SARMIENTO, RICARDO
Address: 16300 NE 19 AVE STE C
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD () Delete
Name: SENDOYA, MONICA
Address: 16300 NE 19 AVE STE C
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SARMIENTO, RICARDO
Address: 5345 NW 158 TERRACE STE 301
City-St-Zip: MIAMI, FL 33014

Title: VD (X) Change () Addition
Name: SENDOYA, MONICA
Address: 5345 NW 158 TERRACE STE 301
City-St-Zip: MIAMI, FL 33014

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

SIGNATURE: RICARDO SARMIENTO

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date