


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000022959
 1. Entity Name
ZIGMONT MAGIC F/X, INC.



Principal Place of Business Mailing Address
 1206 BARONWOOD PLACE 1206 BARONWOOD PLACE
 BRANDON, FL 33510 BRANDON, FL 33510



01122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3700575 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
ZIGMONT, LISA
1206 BARONWOOD PLACE
BRANDON, FL 33510

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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: *Lisa Zigmont* LISA ZIGMONT 1/12/04
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ZIGMONT, STEVEN P
STREET ADDRESS	1206 BARONWOOD PLACE
CITY ST ZIP	BRANDON, FL 33510
TITLE	ST
NAME	ZIGMONT, LISA K
STREET ADDRESS	1206 BARONWOOD PLACE
CITY ST ZIP	BRANDON, FL 33510
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: *Lisa Zigmont* LISA ZIGMONT 1/12/04 813-689 6269
Signature and typed or printed name of signing officer or director Date Days to Print #