

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000025985

Entity Name: MAGIC CITY BUSINESSES, INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

499 NORTH SR 434
SUITE 1013
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

499 NORTH SR 434
SUITE 1013
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

2121 BLUFF OAK ST
APOPKA, FL 32712

FEI Number: 59-3706834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KRAUSE, MITCHEL B
1220 DOUGLAS AVE, STE 203
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COWAN, CHESTER R JR
Address: 2121 BLUFF OAK ST
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHESTER R COWAN JR

PRES

04/11/2005

Electronic Signature of Signing Officer or Director

Date