

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031774

Entity Name: M.A.G. TEAM, INC.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

524 HIGHLAND ST N
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

524 HIGHLAND ST N
ST. PETERSBURG, FL 33701

New Mailing Address:

951 MONTROSE BLVD N.
ST. PETERSBURG, FL 33703

FEI Number: 59-3708724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERTHLELOT, MICHELLE M
524 HIGHLAND ST N
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

BERTHLELOT, MICHELLE M
951 MONTROSE BLVD N.
SAINT PETERSBURG, FL 33703 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: MICHELLE M BERTHELOT

04/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BERTHELOT, BERTHELOT M
Address: 951 MANTROSE BLVD N
City-St-Zip: SAINT PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BERTHELOT, BERTHELOT M
Address: 951 MONTROSE BLVD N
City-St-Zip: SAINT PETERSBURG, FL 33703

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MICHELLE M BERTHELOT

PRES

04/15/2006

Electronic Signature of Signing Officer or Director

Date