2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008
Secretary of State

DOCUMENT# P01000065955

Entity Name: MAGIC TOURS & SERVICES, INC.

Current Principal Place of Business:

7061 GRAND NATIONAL DR
STE 107-E
ORLANDO, FL 32819

New Principal Place of Business:

7031 GRAND NATIONAL DR
STE 105-B
ORLANDO, FL 32819

Current Mailing Address:

7061 GRAND NATIONAL DR
STE 107-E
ORLANDO, FL 32819

New Mailing Address:

7031 GRAND NATIONAL DR
STE 105-B
ORLANDO, FL 32819

FEI Number: 59-3730637 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OCAMPO, HECTOR FABIO
7061 GRAND NATIONAL DR
STE 107-E
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

OCAMPO, HECTOR FABIO
7031 GRAND NATIONAL DR
STE 105-B
ORLANDO, FL 32819 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: HECTOR FABIO OCAMPO 01/17/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: OCAMPO, NUBIA
Address: 7061 GRAND NATIONAL DR STE 107-E
City-St-Zip: ORLANDO, FL 32819

Title: P ( ) Delete
Name: OCAMPO, HECTOR FABIO
Address: 7061 GRAND NATIONAL DR STE 107-E
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: OCAMPO, NUBIA
Address: 7031 GRAND NATIONAL DR STE 105-B
City-St-Zip: ORLANDO, FL 32819

Title: P (X) Change ( ) Addition
Name: OCAMPO, HECTOR FABIO
Address: 7031 GRAND NATIONAL DR STE 105-B
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify 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: NUBIA OCAMPO S 01/17/2008
Electronic Signature of Signing Officer or Director Date