

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90199 042 ***150.00

DOCUMENT # P01000080509

1. Entity Name
MAGIC CITY REALTY, INC.



Principal Place of Business
**770 PONCE DE LEON BLVD
#222
CORAL GABLES, FL 33134**

Mailing Address
**770 PONCE DE LEON BLVD
#222
CORAL GABLES, FL 33134**

40062609



2. Principal Place of Business
5748 N.E. 27 AVE
Suite, Apt. #, etc.

3. Mailing Address
5748 N.E. 27 AVE
Suite, Apt. #, etc.

06282005 Chg-P CR2E034 (10/03)

City & State
FT. LAUDERDALE, FL
Zip
33308 Country
U.S.A.

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FT. LAUDERDALE, FL.
Zip
33308 Country
U.S.A.

4. FEI Number
22-3861722 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HERNANDEZ, MIGUEL A
770 PONCE DE LEON BLVD, STE 222
CORAL GABLES, FL 33134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PST
HERNANDEZ, MIGUEL A
770 PONCE DE LEON BLVD, STE 222
CORAL GABLES, FL 33134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
PUEYO, CAROLINA
770 PONCE DE LEON BLVD, STE 222
CORAL GABLES, FL 33134** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**5748 N.E. 27 AVE
FT. LAUDERDALE, FL. 33308** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**5748 N.E. 27 AVE.
FT. LAUDERDALE, FL. 33308** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 keys empowered.

SIGNATURE:

[Handwritten Signature]

7-8-05