2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Sep 06, 2006 8:00 am Secretary of State DOCUMENT # P01000080509 09-06-2006 90038 011 ***150.00 1. Entity Name MAGIC CITY REALTY, INC. Principal Place of Business Mailing Address **5748 NORTHEAST 27 AVENUE 5748 NORTHEAST 27 AVENUE** FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08302006 Cha-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 22-3861722 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent X/ezNANDEZ HERNANDEZ, MIGUEL A Street Address (P.O. Box Number is Not Acceptable) 770 PONCE DE LEON BLVD, STE 222 CORAL GABLES, FL 33134 5748 H.E. 27 AVR. Zip Code 27308 LAUDERDALE, FL 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 rejustation) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRESIDENTO PST Delete TITLE CAABLINA FURYO AVE. 5748 N.E. 29 AVE. HERNANDEZ, MIGUEL A HAME NAME STREET ADDRESS **5748 NORTHEAST 27 AVENUE** STREET ADDRESS CITY-ST-7/P FORT LAUDERDALE, FL 33308 CITY-ST-7IP ET. LAWOR DALE, FL. 33308 ☐ Change TITLE ☐ Delete TITLE ☐ Addition PUEYO, CAROLINA NAME STREET ADDRESS 5748 NORTHEAST 27 AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33308 CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Detete IIILE Change ☐ Addition MARKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete me Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied entail 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 by the receiver by trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if SIGNATURE

FILED