

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000097283

Entity Name: MAGIC WEB HOSTING, INC.

FILED
Feb 16, 2005
Secretary of State

Current Principal Place of Business:

11515 WINGHAM CT
ORLANDO, FL 32837

New Principal Place of Business:

1321 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

11515 WINGHAM CT
ORLANDO, FL 32837

New Mailing Address:

1321 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3747844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVERSEN, NATHAN E
11515 WINGHAM CT
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

NAVERSEN, NATHAN E
1321 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS, FL 32714 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:

02/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: NAVERSEN, NATHAN E
Address: 11515 WINGHAM CT
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: NAVERSEN, NATHAN E
Address: 1321 BLACK WILLOW TRAIL
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: NATHAN NAVERSEN

PSD

02/16/2005

Electronic Signature of Signing Officer or Director

Date