

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED

05 MAR -8 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000112555

1. Entity Name
MEDIA WIZARDS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
15715 South Dixie Highway

3. Mailing Address
same

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State

Zip
33157

Country
United States

Zip
33157

Country

REINSTATEMENT

02-05

4. FEI Number Applied For
 Not Applicable

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

7. Name and Address of Current Registered Agent

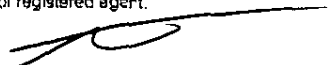
Name **Trevor Robinson**

Street Address (P.O. Box Number is Not Acceptable)
15715 South Dixie Highway

City **Miami** FL Zip Code **33157**

DO NOT WRITE IN THIS SPACE

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  DATE **3/3/05**

Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when re-filing) DATE

January Fee is \$150.00
After May 1, Fee is \$350.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD George Moreno 15715 South Dixie Highway, Suite 316 Miami, Florida 33157	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600048983536 03/23/05--01014--022 **500.00
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **George Moreno** DATE **3/3/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAY/MO/YEAR

**AFFIDAVIT IN SUPPORT OF REQUEST TO
WAIVE THE FLORIDA DEPARTMENT OF STATE
CORPORATE REINSTATEMENT FEES**

STATE OF FLORIDA)
)
COUNTY OF MIAMI-DADE)

1. Trevor Robinson is the Director of MEDIA WIZARDS, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation was administratively dissolved by the Florida Department of State on 4 October 2002.
3. That the Corporation failed to file its 2002, 2003, 2004, 2005 Annual Report or pay the 2002, 2003, 2004, 2005 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2002, 2003, 2004, 2005 Annual Report fees and the filing of its 2002, 2003, 2004, 2005 Annual Reports, which are presented simultaneously with this Affidavit.
5. MEDIA WIZARDS, INC. satisfies the requirements of the Florida Statutes 607.0401.
6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 17 day of February, 2005

FURTHER, AFFIANT SAYETH NOT

MEDIA WIZARDS, INC
By: [Signature]
Trevor Robinson, Director

SWORN AND SUBSCRIBED
before me this 17 day of Feb, 2005.



[Signature]
Notary Public, State of Florida at Large
Printed Name: Mindy Hernandez
Commission Expires: 8/22/2005