2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000010335 DOCUMENT

1. Entity Name

MAGIC STONE CREATION, INC.



FILED May 01, 2003 8:00 am Secretary of State 05-01-2003 90823 013 ***150.00

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Principal Plac	e of Business	Mailing	Address	2.5	(- m m	-000	,,			
320 COMMERCIAL STREET			320 COMMERCIAL STREET 320 COMME			The Co	AL			
CASSELBERRY FL 32707			LBERRY FL 32707	2000	ELBER	الد				
328 C	OMMERCIAL ASSELBERRY Place of Business	5/2	フェブ	CF13-	-3270	10		40 1601 1644 1		
2 Dringing C	<u>ASSELISERKY</u> Diago of Dissipage	, /- C - 3 C	-/b/	FL	-3270	4				
z. Principal F	nace of Business	3. Maii	ng Address			1	,	1411 3 2134 1114	11121 2111 1221	
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & Stat	е	City	City & State			4	4, FEI Number Applied For			
Only a one		0.1,9				45 - 0463439 Not Applicable				
Zip	Country	Zip		Country		5. (Certificate of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of	Current Registere	d Agent			7. 1	Name and Address of New Registered A			
				Name - BILA			AC ABID			
ZAHID, AE						s (P.O. Box Number is Not Acceptable)				
	DEN GLENN DRIVE	•				6.6.14.6.14.6.1				
ORLANDO FL 32807					7554 Golden Goden Glenn DR City Orlando FL Zig Code 07					
	į. į				City 01	·la.	ndo FL	Zip Code	07	
8. The above named entity submits thin 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 / CULTURE / /4/03										
0.	Signature, typed or printed name of regis	stered agent and title if appli	cable. (NO	TE: Registered A	gent signature requir	red when re	einstating) DATE			
F	ILE NOW!!! FEE IS \$15	0.00					O Floring Compaign Financias		0	
	r May 1, 2003 Fee will be \$	·					S. Election Campaign Financing Trust Fund Contribution.	•	O May Be to Fees	
Make Checi	k Payable to Florida Depar	tment of State								
10.	OFFICE	ERS AND DIRECTOR		11.			DDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 11	
TITLE	PD _{x_{s,r}}		Delete Delete	. TITLE	P_{j}			☐ Change	Addition	
NAME .	ZAHID, ABID	On /C		NAME	B1	LAL	L ABID			
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		-	M	-	in	-/	Golden Glenn Da do FC 32807	☐ Change	□ Addition	
TITLE NAME	VPTD		Delete	TITLE NAME	10,	CCPP	103 PC . 3280 /	∟ Unange	☐ Addition	
STREET ADDRESS	SANCHEZ, HECTOR 2511 PINE TRAIL			STREET A	DDRESS					
CITY-ST-ZIP	KISSIMMEE FL 34746			CITY-ST						
TITLE	SD		Delete	TITLE	50	<u> </u>		☐ Change	Addition	
NAME	QADRI, MATEEN		Detere	NAME	30	2A1	RI MATEEN	□ onenge	7.10011.01	
STREET ADDRESS	320 COMMERCIAL STRE	FT		STREET A	DDRESS 3	200	COMMERCIAL ST,			
CITY-ST-ZIP	CASSELBERRY FL 32707	,		CITY-ST	-ZIP	CAS	RI MATEEN COMMERCIAL ST, SELBERRY, FL-32	107		
TITLE			☐ Delete	TITLE				☐ Change	☐ Addition	
NAME				NAME						
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	nortification that information	plied with this firs	None net ex ell 1			Seet!	110.07(2)(i) Fladd- C	(f. , ph = 1 x)	favorest - :	
indicated	certify that the information support on this report or supplementa	pilea with this filing of Il report is true a nd a	aces not quality for securate and that	or the exemp my signature	uon stated in S shall have the	section in same to	119.07(3)(i), Florida Statutes. I further cert legal effect as if made under oath; that I a	iry that the in m an officer i	or director	
of the cor changed,	poration or the receiver or trus or on an attachment with an a	stee empowered to e address with all other	xecute this reporer like empowered	t as required d.	by Chapter 60	07, Florid	legal effect as if made under oath; that I a da Statutes; and that my name appears in	Block 10 or	Block 11 if	

SIGNATURE: