

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90339 037 ***150.00

DOCUMENT # P02000026465 1. Entity Name MAGNIFICENT REAL ESTATE GROUP, INC.					
Principal Place of Business 246 HOLLYWOOD BLVD. 502 HOLLYWOOD, FL 33020			Mailing Address 246 HOLLYWOOD BLVD. 502 HOLLYWOOD, FL 33020		
2. Principal Place of Business 2450 Hollywood Blvd. Suite, Apt. #, etc. 502		3. Mailing Address 2450 Hollywood Blvd. Suite, Apt. #, etc. 502		 04082004 Chg-P CR2E034 (10/03)	
City & State Hollywood, FL		City & State Hollywood, FL			
Zip Country 33020 USA		Zip Country 33020 USA			
4. FEI Number 13-4224231		Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				4/16/04	
6. Name and Address of Current Registered Agent MIGNACCA, ROBERT 2450 HOLLYWOOD BLVD #502 HOLLYWOOD, FL 33020					
7. Name and Address of New Registered Agent Name Laurence J. Linder Street Address (P.O. Box Number is Not Acceptable) 2450 Hollywood Blvd. Suite Suite 502 City Hollywood FL Zip Code 33020					
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 <i>Laurence J. Linder</i> Laurence J. Linder DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME MIGNACCA, ROBERT STREET ADDRESS 2450 HOLLYWOOD BLVD #502 CITY-ST-ZIP HOLLYWOOD, FL 33020	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE T NAME LINDER, LAURENCES J STREET ADDRESS 2450 HOLLYWOOD BLVD #502 CITY-ST-ZIP HOLLYWOOD, FL 33020	☒ Delete		TITLE P, T NAME Linder, Laurence J. STREET ADDRESS 2450 Hollywood Blvd #502 CITY-ST-ZIP Hollywood, FL 33020	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS 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)(l), 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 like empowered.					
SIGNATURE <i>Laurence J. Linder</i> Laurence J. Linder			Date 4/16/04 Daytime Phone #		