2003 FOR PROFIT CORPORATION

changed, or on an attachm

SIGNATURE:

FILED Aug 13, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR P02000109582 DOCUMENT # 08-13-2003 90117 001 *****8.75 1. Entity Name SOUTH FLORIDA MAGIC COMPANY 08-13-2003 90117 002 ***150.00 Mailing Address Principal Place of Business 225 DISC DRIVE 225 DISC DRIVE **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** CHECK HERE IF MAKING CHANGES Qity & State Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required Name and Address of New Registered Agent FLORIDA AGENT SERVICES, INC. Jumber is N cceptable) 1221 BRICKELL AVENUE SUITE 900 **MIAMI FL 33131** 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 SIGNATURE DATE pplicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition Change ☐ Delete TITLE TAYLOR, LARRY NAME NAME 225 DISC DRIVE STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE TAYLOR, SHIRLEY NAME NAME 225 DISC DRIVE STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS € 54 f CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 supplier ental 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 regeiver 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 12. I hereby certify that the information supplied with this filing does ;

with all other like en

Attachment 55054105 #POQUXV09582

SOUTH FLORIDA MAGIC CO.

413 E. BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33435

August 9, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl 32302-1500

To Whom It May Concern:

Please find enclosed a check in the amount of \$150.00 for the filing of the 2003 Uniform Business Report for the above named corporation. As per the information provided on the instruction sheet, this letter is to confirm that this is the first notification our corporation has received and by attaching this letter the late fee will be waived.

Please contact our corporation at the above address if any further information is required.

Sincerely

Shirley Taylor

Vice President