

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071606

Entity Name: MAGNE-TRONIX, INC.

FILED
Mar 28, 2009
Secretary of State

Current Principal Place of Business:

3500 GALT OCEAN DRIVE, SUITE 1516
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3500 GALT OCEAN DRIVE, SUITE 1516
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 55-0851505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALBERT, PHILIP H
3500 GALT OCEAN DRIVE, SUITE 1516
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CSD () Delete
Name: TALBERT, PHILIP H
Address: 3500 GALT OCEAN DRIVE, SUITE 1516
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PD () Delete
Name: TALBERT, PHILIP H II
Address: 908 FIRETREE ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: EVPD () Delete
Name: DREILING, TODD
Address: 3300 W. 41ST
City-St-Zip: HAYS, KA 67601

Title: D () Delete
Name: MOSCOW, PETER
Address: 409 MARQUETTE DRIVE
City-St-Zip: LOUISVILLE, KY 40222

Title: D () Delete
Name: MANELAS, ARTHUR
Address: 349 MAMMOTH RD
City-St-Zip: PELHAM, NH 03076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PHILIP H. TALBERT

CSD

03/28/2009

Electronic Signature of Signing Officer or Director

Date