

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098023

Entity Name: MAGBO, CORP.

FILED
Jun 30, 2004
Secretary of State

Current Principal Place of Business:

4704 SW 160 AVE #223
MIRAMAR, FL 33027

New Principal Place of Business:

10802 KEYS GATE DRIVE
RIVERVIEW, FL 33569

Current Mailing Address:

4704 SW 160 AVE #223
MIRAMAR, FL 33027

New Mailing Address:

10802 KEYS AGET DRIVE
RIVERVIEW, FL 33569

FEI Number: 43-2027435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONAPARTE, MARINA
4704 SW 160 AVE #223
MIRAMAR, FL 33027

Name and Address of New Registered Agent:

BONAPARTE, MARINA
10802 KEYS GATE DRIVE
RIVERVIEW, FL 33569

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: ANDRES SANDOVAL

06/30/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BONAPARTE, MARINA
Address: 4704 SW 160 AVE #223
City-St-Zip: MIRAMAR, FL 33027

Title: V () Delete
Name: BONAPARTE NETO, GUILHERME
Address: 4704 SW 160 AVE #223
City-St-Zip: MIRAMAR, FL 33027

Title: S (X) Delete
Name: SANDOVAL, ANDRES E
Address: 4704 SW 160 AVE #223
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BONAPARTE, MARINA
Address: 10802 KEYS GATE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: V (X) Change () Addition
Name: SANDOVAL, ANDRES
Address: 10802 KEYS GATE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDRES SANDOVAL

V

06/30/2004

Electronic Signature of Signing Officer or Director

Date