2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006
Secretary of State

DOCUMENT# P03000102445

Entity Name: MAGIC PAINTING OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1909 SUMMERCLUB DRIVE
#209
OVIEDO, FL 32765

New Principal Place of Business:

590 N.SEMORAN BLVD
#900
ORLANDO, FL 32807

Current Mailing Address:

1909 SUMMERCLUB DRIVE
#209
OVIEDO, FL 32765

New Mailing Address:

590 N.SEMORAN BLVD
#900
ORLANDO, FL 32807

FEI Number: 54-2125461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PENA, GIVOANNI
1909 SUMMERCLUB DRIVE
#209
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

PENA, GIVOANNI
590 N.SEMORAN BLVD
#900
ORLANDO, FL 32807 US

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: _____ 03/08/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: PENA, GIOVANNI
Address: 1909 SUMMERCLUB DRIVE #209
City-St-Zip: OVIEDO, FL 32765

Title: SEC ( ) Delete
Name: BOLIVAR, LUZ A
Address: 1909 SUMMER CLUB DR APT 209
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: PENA, GIOVANNI
Address: 590 N.SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32807

Title: SEC (X) Change ( ) Addition
Name: BOLIVAR, LUZ A
Address: 590 N.SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32807

I hereby certify that the information supplied with this filing does not qualify for the 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: GIOVANNI PENA PRES 03/08/2006
Electronic Signature of Signing Officer or Director — Date