

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124246

Entity Name: MAGIC HELMET SERVICES INC.

FILED  
Apr 03, 2007  
Secretary of State

## Current Principal Place of Business:

16684 77TH LN N  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

16684 77TH LN N  
LOXAHATCHEE, FL 33470

## New Mailing Address:

232 KINGSTON CT.  
DAWSONVILLE, GA 30534

FEI Number: 20-0359791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DRAKE, GLEN A  
16684 77TH LN N  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

DRAKE, GLEN A  
16684 77TH LANE N  
LOXAHATCHEE, FL 33470 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: GLEN A. DRAKE

04/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: DRAKE, GLEN A  
Address: 16684 77TH LN N  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S ( ) Delete  
Name: DRAKE, CYNTHIA  
Address: 16684 77TH LN N  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP ( ) Delete  
Name: GALLIVAN, DARREL J  
Address: 16684 77TH LANE N  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V ( ) Delete  
Name: DRAKE, RONDEL L  
Address: 6700 SW 97 AVE.  
City-St-Zip: MIAMI, FL 33173

## 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:

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: GLEN A. DRAKE

PT

04/03/2007

Electronic Signature of Signing Officer or Director

Date