

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130551

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: MAJESTIC PROPERTIES OF FLORIDA, INC.

**Current Principal Place of Business:**

3265 MERIDIAN PARKWAY, SUITE 130  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

3265 MERIDIAN PARKWAY, SUITE 130  
WESTON, FL 33331

**New Mailing Address:**

FEI Number: 56-2413791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GAVAGNI, JOSEPH A  
419 NORTHEAST 19TH STREET, #402  
MIAMI, FL 33132 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: P ( ) Delete  
Name: GAVAGNI, JOSEPH A  
Address: 419 NORTHEAST 19TH STREET, #402  
City-St-Zip: MIAMI, FL 33132

Title: VP ( ) Delete  
Name: GAVAGNI, ROBERT E  
Address: 730 NW 138TH ST  
City-St-Zip: MIAMI, FL 33168

Title: S ( ) Delete  
Name: GLACCUM, DINANA  
Address: 9000 SW 196TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: GLACCUM, DIANNA  
Address: 9000 SW 196TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

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: JOSEPH GAVAGNI

MR

02/28/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date