

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051479

FILED  
Feb 27, 2009  
Secretary of State

Entity Name: PCB-MAGIC, INC.

**Current Principal Place of Business:**

8445 ST. MARINO BLVD  
SUITE 1  
ORLANDO, FL 32836 US

**New Principal Place of Business:**

**Current Mailing Address:**

8445 ST. MARINO BLVD  
SUITE 1  
ORLANDO, FL 32836 US

**New Mailing Address:**

FEI Number: 20-0901222      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHAH, NIPUL  
8445 ST. MARINO BLVD  
SUITE 1  
ORLANDO, FL 32836 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: VP ( ) Delete  
Name: SHAH, NIPUL M  
Address: 8445 ST. MARINO BLVD  
City-St-Zip: ORLANDO, FL 32836 US

Title: P ( ) Delete  
Name: SHAH, MAMTA  
Address: 8445 ST. MARINO BLVD  
City-St-Zip: ORLANDO, FL 32836 US

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

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: NIPUL SHAH

VP

02/27/2009

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

\_\_\_\_\_ Date