

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078949

Entity Name: MAGNET, INC.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

% BUCHANAN INGERSOLL, PC  
100 SE SECOND ST - STE 2100  
MIAMI, FL 33131

## New Principal Place of Business:

1208 DUNCAN STREET  
KEY WEST, FL 33040

## Current Mailing Address:

% BUCHANAN INGERSOLL, PC  
100 SE SECOND ST - STE 2100  
MIAMI, FL 33131

## New Mailing Address:

1208 DUNCAN STREET  
KEY WEST, FL 33040

FEI Number: 20-1134136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUCHANAN INGERSOLL, PC  
100 SE SECOND ST  
STE 2100  
MIAMI, FL 33131 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: D ( ) Delete  
Name: KOSKE, ROBERT  
Address: % 100 SE SECOND ST - STE 2100  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: KOSKE, ROBERT  
Address: 1208 DUNCAN STREET  
City-St-Zip: KEY WEST, FL 33040

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: ROBERT KOSKE

D

04/30/2005

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

\_\_\_\_\_  
Date