

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099754

FILED  
Jun 29, 2005  
Secretary of State

Entity Name: MAGNI PUBLISHING HOUSE INC.

## Current Principal Place of Business:

640 POINSETTIA RD  
BELLEAR, FL 33756

## New Principal Place of Business:

640 POINSETTIA RD  
BELLEAIR, FL 33756

## Current Mailing Address:

640 POINSETTIA RD  
BELLEAR, FL 33756

## New Mailing Address:

640 POINSETTIA RD  
BELLEAIR, FL 33756

FEI Number: 20-1395166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAVANNE, PHILIPPE  
640 POINSETTIA RD  
BELLEAR, FL 33756 US

## Name and Address of New Registered Agent:

CHAVANNE, PHILIPPE  
640 POINSETTIA RD  
BELLEAIR, FL 33756 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: PHILIPPE CHAVANNE

06/29/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CHAVANNE, PHILIPPE  
Address: 640 POINSETTIA RD  
City-St-Zip: BELLEAR, FL 33756

Title: V ( ) Delete  
Name: MAGNI, VINCENT  
Address: 5 HAMEAU BRANLIN, 89520 SAINTS EN PUISAYE  
City-St-Zip: FRANCE,

Title: S ( ) Delete  
Name: DESCARPENTRIES, MARIE-CHRISTIN E  
Address: 2 RUE DE LA CONCORDE, 92600 ASNIERES SUR S  
City-St-Zip: EINE, FRANCE,

Title: T (X) Delete  
Name: HUBER, EVA  
Address: NEYLANDS FARM, EAST GRINSTEAD, RH19 HP  
City-St-Zip: WEST SUSSEX, UNITED KINGDOM,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CHAVANNE, PHILIPPE  
Address: 640 POINSETTIA RD  
City-St-Zip: BELLEAIR, FL 33756

Title: S (X) Change ( ) Addition  
Name: CHAVANNE, PHILIPPE  
Address: 640 POINSETTIA RD  
City-St-Zip: BELLEAIR, FL 33756

Title: T (X) Change ( ) Addition  
Name: CHAVANNE, PHILIPPE  
Address: 640 POINSETTIA RD  
City-St-Zip: BELLEAIR, FL 33756

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 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: PHILIPPE CHAVANNE

P

06/29/2005

Electronic Signature of Signing Officer or Director

Date