## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000099094

Entity Name: MAGIC MIND INC.

FILED Jan 19, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

201 SW 52ND AVENUE 1420 ATLANTIC SHORES PLANTATION, FL 33317

135

HALLANDALE, FL 33009

**Current Mailing Address: New Mailing Address:** 

201 SW 52ND AVENUE 1420 ATLANTIC SHORES PLANTATION, FL 33317

HALLANDALE, FL 33009

FEI Number: 20-3150308 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BLONDIN, MSTISLAV FLAUTAT, NATHALIE 201 SW 52ND AVENUE 1420 ATLANTIC SHORES PLANTATION, FL 33317 US 135

HALLANDALE, FL 33009 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: NATHALIE FLAUTAT 01/19/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

BLONDIN, MSTISLAV FLAUTAT, NATHALIE Name: Name: 201 SW 52ND AVENUE 1420 ATLANTIC SHORES # 135 Address: Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: HALLANDALE, FL 33009

Title: Title: (X) Change ( ) Addition () Delete

Name: RUAULT, GINETTE Name: RUAULT, GINETTE

201 SW 52ND AVENUE Address: 1420 ATLANTIC SHORES # 135 Address: HALLANDALE, FL 33009 PLANTATION, FL 33317 City-St-Zip: 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: NATHALIE FLAUTAT PD 01/19/2006