2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P05000104502

Entity Name: MONICA'S MAGICAL CELEBRATIONS, INC.

Current Principal Place of Business:

12851 SW 88 ST.
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

15819 S.W. 101 STREET
MIAMI, FL 33196

New Mailing Address:

FEI Number: 84-1708239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSE, MONICA
15819 S.W. 101 STREET
MIAMI, FL 33196 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: ROSE, STEPHEN
Address: 15819 S.W. 101 STREET
City-St-Zip: MIAMI, FL 33196

Title: D (X) Delete
Name: ROSE, MONICA
Address: 15819 S.W. 101 STREET
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ROSE, MONICA
Address: 15819 SW 101 STREET
City-St-Zip: MIAMI, FL 33196 US

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: MONICA ROSE PRES 04/27/2007

Electronic Signature of Signing Officer or Director — Date