

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 26, 2006 8:00 am
Secretary of State

05-11-2006 90242 034 ***150.00

DOCUMENT # P05000156607 1. Entity Name MAGALDU PROPERTIES INC																													
Principal Place of Business 7200 NW 46TH ST LAUDERHILL, FL 33319			Mailing Address 7200 NW 46TH ST LAUDERHILL, FL 33319																										
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																										
4. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				04232006 Chg-P CR2E034 (11/05) FEI Number 20-3989712 Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent DUROSIER, ALCIDES 7200 NW 46TH ST LAUDERHILL, FL 33319			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																										
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 85%;"> P DUROSIER, ALCIDES 7200 NW 46TH ST LAUDERHILL, FL 33319 <input type="checkbox"/> Delete </td> </tr> <tr> <td> VP DUROSIER, MARGARETTE 7200 NW 46TH ST LAUDERHILL, FL 33319 <input type="checkbox"/> Delete </td> <td></td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DUROSIER, ALCIDES 7200 NW 46TH ST LAUDERHILL, FL 33319 <input type="checkbox"/> Delete	VP DUROSIER, MARGARETTE 7200 NW 46TH ST LAUDERHILL, FL 33319 <input type="checkbox"/> Delete										11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 85%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition										
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <u><i>Alcides Drosier</i></u> <u>4/23/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																													