## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000072543

Entity Name: MAGICAL HOME THEATERS INC.

Apr 25, 2011 Secretary of State

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

2856 VIA CAMPANIA ST 4331 VERONICA S. SHOEMAKER BLVD FORT MYERS, FL 33905 US

SUITE #14

FORT MYERS, FL 33916

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

2856 VIA CAMPANIA ST 4331 VERONICA S. SHOEMAKER BLVD FORT MYERS, FL 33905 US

SUITE #14

FORT MYERS, FL 33916

FEI Number: 26-0351889 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:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD SUITE A-100 TAMPA, FL 336123425 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: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PRFS

Name: LAWTON, ANDRE W 2856 VIA CAMPANIA ST Address: City-St-Zip: FORT MYERS, FL 33905 US

Title:

Name: LAWTON, SHENANDOAH 2856 VIA CAMPANIA ST Address: FORT MYERS, FL 33905 US City-St-Zip:

Title: SECT

LAWTON, SHENANDAOH Name: 2856 VIA CAMPANIA ST Address: City-St-Zip: FORT MYERS, FL 33905 US

Title: DIR

LAWTON, ANDRE W Name: Address: 2856 VIA CAMPANIA ST City-St-Zip: FORT MYERS, FL 33908 US

I hereby 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 all other like empowered.

SIGNATURE: ANDRE LAWTON **PRES** 04/25/2011