

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000042812

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: MAGICSPIRIT INTERNATIONAL, INC.

## Current Principal Place of Business:

1953 COLONIAL BLVD.  
FT. MYERS, FL 33907

## New Principal Place of Business:

1953 COLONIAL BLVD.  
FORT MYERS, FL 33907

## Current Mailing Address:

1953 COLONIAL BLVD.  
FT. MYERS, FL 33907

## New Mailing Address:

FEI Number: 26-2506519      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SKERRETT, RICARDO  
1953 COLONIAL BLVD.  
FT. MYERS, FL 33907      US

## Name and Address of New Registered Agent:

MLA MULTISERVICES, INC  
1953 COLONIAL BLVD  
FT. MYERS, FL 33907      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: MAE SALCEDO FERNANDEZ

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COHEN-GEVENOIS, MYRA  
Address: 4408 NORTH GULF CIRCLE  
City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title: VP ( ) Delete  
Name: BIBILONI-LEMAIRE, LLUC A  
Address: 4408 NORTH GULF CIRCLE  
City-St-Zip: NORTH FT. MYERS, FL 33903 US

Title: S (X) Delete  
Name: SKERRETT, RICARDO  
Address: 1953 COLONIAL BLVD.  
City-St-Zip: FT. MYERS, FL 33907 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MYRA COHEN-GEVENOIS

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date