2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000083281

Entity Name: TJ MAGIC, INC.

Address:

City-St-Zip:

FILED Jun 16, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:			
	ER MARTIN A LTON BEACH		32A	99 EGLIN PARKWAY 32A FORT WALTON BEACH, FL 32548			
Current M	ailing Addre	ss:	New Maili	New Mailing Address:			
	ER MARTIN A LTON BEACH		32A	99 EGLIN PARKWAY 32A FORT WALTON BEACH, FL 32548			
FEI Number:	80-0259305	FEI Number Applied For () FEI N	lumber Not App	licable ()	Certificate of Status D	esired ()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	ANIEL C TH AVENUE, R, FL 32579	SUITE 1 US	99 EGLIN 32A	PATTISON, TERESA K 99 EGLIN PARKWAY 32A FT. WALTON BEACH, FL 32548 US			
	named entity of Florida.	submits this statement for the purpose	e of changing i	its registered	office or registered ag	ent, or both,	
SIGNATUR	RE: TERESA	K. PATTISON		06/16/2009			
	Electro	nic Signature of Registered Agent			Date		
		93(2)(b), F.S., the corporation did not receiving Trust Fund Contribution ().	e the prior notic	e.			
	S AND DIREC	- ' '	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PERRI, DANIE	AVENUE,SUITE ONE	Title: Name: Address: City-St-Zip:	PRES (PATTISON, T 21 BAYSHOR SHALIMAR, F	E DRIVE		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP (ROY, JACKIE 47 MEIGS DF SHALIMAR, F	RIVE		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SEC (PATTISON, M 21 BAYSHOR SHALIMAR, F	E DRIVE		
Title: Name:	() Delete	Title: Name:	TRES () Change (X) Addition		

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.

Address:

City-St-Zip:

47 MEIGS DRIVE

SHALIMAR, FL 32579 US

SIGNATURE: TERESA K. PATTISON PRES 06/16/2009