## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000045729

Entity Name: NATURE'S GREEN MAGIC, INC.

FILED Apr 20, 2011 Secretary of State

| Current Principal Place of Business:                   |                                 | New Principal Place of Business:          |                                      |
|--------------------------------------------------------|---------------------------------|-------------------------------------------|--------------------------------------|
| 20312 NE 16TH PL<br>MIAMI, FL 33179                    |                                 |                                           |                                      |
| Current Mailing Address:                               |                                 | New Mailing Address:                      | :                                    |
| 20312 NE 16TH PL<br>MIAMI, FL 33179                    |                                 |                                           |                                      |
| FEI Number: 80-0423558                                 | 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: |                                      |
| TORRES, RAUL<br>20312 NE 16TH PL<br>MIAMI, FL 33179 US |                                 |                                           |                                      |
| The above named entity s in the State of Florida.      | ubmits this statement for the p | urpose of changing its registered         | office or registered agent, or both, |
| SIGNATURE:                                             |                                 |                                           |                                      |
| Electronic Signature of Registered Agent               |                                 | ent                                       | Date                                 |
|                                                        |                                 |                                           |                                      |
| OFFICERS AND DIRECT                                    | rors:                           |                                           |                                      |

Title:

Name: TORRES, RAUL 20312 NE 16TH PL Address: City-St-Zip: MIAMI, FL 33179

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 required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAUL TORRES **PRES** 04/20/2011