2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State
03-10-2003 90743 024 ***150.00

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DOCUMENT # P92000008424

1. Entity Name
MAGY K & S, INC.

Principal Place of Business	Mailing Address
311 W. MARION AVE. PUNTA GORDA, FL 33950	311 W. MARION AVE. PUNTA GORDA, FL 33950

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
9670 9676 NW 35 STR	4915 NW 116 AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CORAL SPRINGS, FLORIDA	City & State: CORAL SPRINGS, FLORIDA
Zip: 33065 Country: USA	Zip: 33076 Country: FLORIDA

4. FEI Number: 65-0402531 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOORLEY, SAM G.
311 W. MARION AVE.
PUNTA GORDA, FL 33950

7. Name and Address of New Registered Agent

Name: MOORLEY, SAM G.
Street Address (P.O. Box Number is Not Acceptable): 4915 NW 116 AVE
City: CORAL SPRINGS FL Zip Code: 33076

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: Sam G Moorley SAM G MOORLEY PT 03/05/03
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT MOORLEY, SAM G. 29 LAURA DR WESTBURY, NY 11590	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS MOORLEY, KUSIL S. 29 LAURA DR WESTBURY, NY 11590	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Sam G Moorley SAM G MOORLEY 03/05/03 (516) 333-7176
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #