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FILED
May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P95000015988 (5)

1. Corporation Name
MAGIC INVESTMENTS, INC.



Principal Place of Business
**3730 GRISSOM LANE
 KISSIMMEE FL 34741
 US**

Mailing Address
**3730 GRISSOM LANE
 KISSIMMEE FL 34741-4615
 US**

3. Date Incorporated or Qualified
02/24/1995

3a. Date of Last Report
05/01/1996

4. FEI Number
59-3304858

Applied For
 Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25 Country

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent

**MCCARTHY, VERNE
 3730 GRISSOM LANE
 KISSIMMEE FL 34741**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NONE Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **PT EATON, DAVID M.**

STREET ADDRESS **7350 STATE RD 557**

CITY-ST-ZIP **POLK CITY FL**

TITLE DELETE

NAME **VS MCCARTHY, VERNE L.**

STREET ADDRESS **1414 LONDRA LANE**

CITY-ST-ZIP **KISSIMMEE FL**

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT, TREASURER** Change Addition

1.2 NAME **DAVID M. EATON**

1.3 STREET ADDRESS **512 LONGMEADOW ST.**

1.4 CITY-ST-ZIP **CELEBRATION, FL. 34747**

2.1 TITLE **VICE PRESIDENT, SECRETARY** Change Addition

2.2 NAME **VERNE L. MCCARTHY**

2.3 STREET ADDRESS **1401 GRANDVIEW BLVD**

2.4 CITY-ST-ZIP **KISSIMMEE, FL. 34744**

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

CR2E034 (9/96)