## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000053018

1. Corporation Name

MAGIC TOURS AND TRANSPORTATION, INC.

		Princi	pal	Place	of	Bus	iness
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## **FILED** Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90043 047 \*\*\*150.00



Principal Plac	ce of Business	Maili	ng Address					,,,,,		
4630 S. KIRKM	IAN RD., #312	4630	S. KIRKMAN RD., #312	!		1	•			•
ORLANDO FL 3	32811-2802	ORLA	NDO FL 32811-2802			Ì				
			•				DO NO	T WRITE IN THI	S SPACE	
	·					3.	Date incorporated or Q	ualifed		
							07/05/1995		,	. 1
2. Principal P	Place of Business	2a. M	failing Address			4.	FEI Number			Applied For
21	•	26	•			1 "	59-3324198		<del></del>	Not Applicable
Suite, Apt.	# etc		uite, Apt. #, etc.			<del></del> +-	33 00E 4 100			Additional
22		— <del> </del> —	ano, rept. 17, 010.			5.	Certificate of Status Des	sired		Required
City & Stat		27	NA . P. O4-4-				<del></del>			<del></del>
	ie .	— — ·	City & State			6.	Election Campaign Fina	- 11		May Be
23		28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zi	` _	_ Countr	У	8.	This corporation owes t	he current year to		
24	25]	29		10			Personal Property Tax.		Yes	□No
_ <del>_</del>	9. Name and Address of Curr					10.	Name and Address of	New Registere	Agent '	
<b>510</b>		A Santa	UTT	8	1 Nan	ne	•			
ENG	GLEHARDT, JOHN C	ra manari il		8:	2	- 4 A dalan 45	0.00	A 4 - 1 - 1 - 1		<del></del>
	4 E LIVINGSTON ST		* 12 -	۱۵.	Stre	et Address (F	P.O. Box Number is Not	Acceptable)		1
ORL	ANDO FL 32803		•	8:	+-		1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		<u> </u>	22 311 186
						-		State Hill Harry		
				84	City	<del>,</del>	<del></del>		85 Zip	Code
	- 1 · <u>5 ·                                     </u>	1991	and the second					F	<b>∟</b>	- 1
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.	1508, Florida Statutes	, the abo	/e-nam	ed corporation	n submits this statement	for the purpose of	f changing it	s registered
agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obli	igations of Se	ection 607.0505. Florid	nonzed o la Statute	y ine co S.	orporation's bo	oard of directors. I hereb	y accept the appo	onument as i	egisterea
	, , , , ,	<b>3</b>	<b>,</b>							
SIGNATURE										
-	Signature, typed or printed name of registered a	agent and title if ep	plicable. (NOTE; R	egistered Age	ent signatu	ure required when r	reinstating)	. DATE .		
		agent and title if ep AND DIRECT			ent signati		reinstating)		ND DIRECT	ORS IN 12
<b>12.</b> TITLE				13.	ant signati		ADDITIONS/CHANGES			
12. TITLE	OFFICERS .		ORS	13. 1.1 TITLE					ND DIRECT	
12. TITLE NAME	P MADIERA, THOMASO		ORS	13. 1.1 TITLE 1.2 NAME	_		ADDITIONS/CHANGES			
12. TITLE NAME STREET ADDRESS	P MADIERA, THOMASO 5213 PATRICIA DRIVE		ORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	ET ADORE		ADDITIONS/CHANGES			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MADIERA, THOMASO 5213 PATRICIA DRIVE ORLANDO FL 32819		ORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE -1.4 CITY-	ET ADORE		ADDITIONS/CHANGES		☐ Change	e
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P MADIERA, THOMASO 5213 PATRICIA DRIVE ORLANDO FL 32819 S MADIERA, JAQUELINE 12302 BOHANNON BLVD. ORLANDO FL 32824		DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 5.4 CITY- 5.5 STREE 5.4 CITY- 5.5 STREE 5.4 CITY-	ET ADORE	SSS	ADDITIONS/CHANGES		☐ Change	Addition  Addition
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14. 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 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 of 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 the appears with an address, with all other like empowered.

SIGNATURE: