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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000025403 (2)

MAGK GROUP, INC.

FILED Jun 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 8005 S.W. 157 CT. P.O. BOX 520013 MIAMI FL 33193 **MIAMI FL 33184** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0672949 Not Applicable 26 Suite. Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GAVIRIA, JORGE 9769 S. DIXIE HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 201 63 MIAMI FL 33156 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOT): Registered Agent signature required when remstating) Signature, type-line printed name of 975 him diagred and the illiaboly able ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE ALVAREZ, MIGUEL 1.2 NAME NAME P.O. BOX 520013 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33184** 1 4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition 2 1 71116 TITLE KENHAN, GEORGE 2.2 NAME NAME 8005 SW 157 COURT 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33139 CITY-ST-ZIP 2.4 CITY - ST - ZIP Change Addition DELETE 3.13006 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. City-St-ZiP CHY-ST-ZIP Addition Change TITLE DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELFTE 5.1 TITLE 1:TLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 Cft y - ST - ZIP CITY-ST-ZiP DELLIE **4000002558** -06/12/98--01087 TITLE 6.1 THLE 6.2 NAME NAME 6.3 STREET ADDRESS ***158.60 STREET ADDRESS 6.4 CHY-SI-ZIP CITY-ST-ZIP

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 or the powerfor intusting encountering the properties of the corporation of the cor

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4/20/91

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