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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000049010 (7)

FILED Apr 02 1998 8:00am Secretary of State

MAGIC I	REPORTING, INC.					
Principal Place	of Business	Mailing Address				
1309 DELRIDG		P.O. BOX 2007				
ORIANDO FL 32804 ORIANDO FL 32802						DO NOT WRITE IN THIS SPACE
		•				3. Date Incorporated or Qualified
						06/06/1996
2. Principal Pl	ace of Business	2a. Mailing Address			•	4. FEI Number Applied For
副化はす	Anderson Cour	26				59-3383267 Not Applicable
Suite, Apt.	, etc.	Suite, Apt. #, etc.				# Certificate of Status Decired \$8.75 Additional
22		27				Fee Required
City & State 23 Or (a	ndo Florida	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
コックタ	Ol 25 Ame a	Zíp	—	intry		8. This corporation owes or has paid the current year Intangible
24 020	g. Name and Address of Cyrrent	29 Pagistared Agent	30	_		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
200		Kegistereti Agent		81	Name	10. Name and Address of New Registered Agent
	ENBLOOM, APRIL H			ĹĹ		
1309 DELRIDGE ST ORLANDO FL 32804				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
ONL	ANDU FL 32004			83		The state of the s
				1 1	City	FL 85 Zip Code
SIGNATURE	/					rorporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	Signature, typied or printed name of registered agent OFFICE RS AND			d Ageni	signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D OFFICERS AND	DIRECTORS	13. 1.1 Ti	III F	1-	Change Addition
NAME	ROSENBLOOM, APRIL H		1.2 N		7	APRIL Rosenbloom 424 Anderson Court, Suite C
STREET ADDRESS	1309 DELRIDGE ST				DDRESS 7	424 Anderson Court, Suite C
CITY-ST-ZIP	ORLANDO FL 32804			ITY-ST		Orlando Mondo 32801
TITLE	PVST	DELETE	2.1 7			PV 5 T
NAME	ROSENBLOOM, APRIL H		22 N	AME		April Rosanbloom Street Suite C
STREET ADDRESS	1309 DELRIDGE ST		2.3 \$	TREET A	DDAESS	129 77000 3000 0000000
CITY-ST-ZIP	ORLANDO FL 32804		2.40	CITY-ST	-ZIP (Ortando Florida 32801
TITLE		☐ DELETE	3,1 1	ITLE		Change Addition
NAME			3.2 N		1	
STREET ADDRESS					DORESS	
CITY-ST-ZIP		PELETE		CITY - ST	- ZIP	☐ Change ☐ Addition
TITLE		DELETE	4.1 1			Li Onenge Li Mullion
NAME			4.21		DORESS	
STREET ADDRESS				ATY-ST	- 1	
CITY-ST-ZIP TITLE		DELETE	5.1 T		- 281	Change Addition
NAME			5.2 N			_ · · · · ·
STREET ADDRESS					LDDRESS	
CITY-SI-ZIP				HTY-ST		
TITLE		DELETE	6.1 T			Change Addition
NAME			6.2 N	IAME		
STREET ADDRESS			635	TREET A	ODRESS	
City-St-ZIP				ITY-ST		
14. I hereby c	ertify that the information supplied wit	h this filing does not qualify l	for the ex	empti	on stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an
officer or of Block 12 of	director of the corporation of the receipt or Block 13 if changed or on an allac	ver or trustee empowered to himon with all address.	execute	this re	eport as r	required by Chapter 607, Florida Statutes; and that my name apprent in