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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600053596 (8)

MAGBAY, INC.

Principal Place of Business

5449 SOUTH SEMORAN BLVD STE 20 ORLANDO FL 32622 Mailing Address

5449 SOUTH SEMORAN BLVD STE 20 ORLANDO FL 32822-1778

FILED Mar 12 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 06/19/1996	3a. Date	e of Last R	leport
	lace of Business	2a. Mailing Address			4. FEI Number		Ap	oplied For
21		26			59-3388732		No	ot Applicable
Suite. Apt. #, etc. 2		Suile, Apt. #, etc. 27		5. Certificate of Status Desired Fee Rec				
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Ζφ 24]	Country 25		Country 30	/ 		Yes 🗌	No	. 199.032,
	9. Name and Address of Curre	nt Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	glatered A	gent	
HAV	vkins, kevin b		81	Name				
5449 SOUTH SEMORAN BLVD STE 20 ORLANDO FL 32822			82	82 Street Address (P.O. Box Number is Not Acceptable)				
OnL	ANDO TE GEGEE		83					
			84	City		FL	85 Zip	Code
office or r agent. La	to the provisions of Sections 607.05 registered agent for both, in the State in familiar with, and accept the oblic	e of Florida. Such change was at	uthorized b	v the corpora	poration submits this statement for the pation's board of directors. I hereby acceptions	ourpose of o pt the appoi	changing it intment as	ts registered registered
SIGNATURE	Supervise type and protect range of registered ac			ent signature requi	ired when reinstaling)	DATE		
12.	, - · <u>-</u> - · · · · · · · · ·	ND DIRECTORS DELETE	13.	1	ADDITIONS/CHANGES TO OFFIC		Change	Addition
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NAME	HAWKINS, KEVIN B	0 07T 00	1.2 NAME					
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1. I do hereby certly that the information supplied with this filing does not quality for the exemption stated in Section 119,07(3)(i). Florida Statules. 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 this corporation or the ecoiver 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-3-97

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