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

P970000 90 262 DOCUMENT #

MAGNETUDE, INC.

FILED Apr 23 1998 8:00am Secretary of State

|--|

Principal Place of Busine	ss	Mailing Address		
550 5	, Ocean Blud			
				DO NOT WRITE IN THIS SPACE
Boca Raton, FL 33432				
				3. Date Incorporated or Qualified
2. Principal Place of Bus	inna.	a. Mailing Address		
		າ ດັາ ດ	16.65	
21 170 Nw >	ponish River Blud. 20	_ 	1009	
_ ^ \	-	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
City & State	2	- 		Fee Required
City & State	Lu El	City & State	51	6. Election Campaign Financing \$5.00 May Be
23 Boca Ra	200 1 1 L 21	Bocc Rate	Country	Trust Fund Contribution
	Country USA			8. This corporation owes or has paid the current year Intangible
	and Address of Current Rec		30 037	Personal Property Tax due June 30. Yes No
		·	81 Name	10. Name and Address of New Registered Agent
Ame	-i Lawyer Almeria Ave		o Hame	Jill E. Futterman
242	DI - WA		82 Street A	ddress (P.O. Box Number is Not Acceptable)
~ ~ ~ ~ ~	HIMOCIA HIVE	TO C	17	O NW Spanish River Blud.
Cocal	Gables, FL	35134	83 5	wile L
	•	•	84 City	85 Zip Code
			J. J. 1	Soca Ration FL 33431
11. Pursuant to the prov	sions of Sections 607.0502 and	607.1508, Florida Statutes	s, the above-named o	corporation submits this statement for the purpose of changing its registered
office or registered a	gent onboth, in the State of Flo ith and accept the obligations	orida. Such change was au of. Section 607.0505. Flor	ithorized by the corporate ida Statutes	oration's board of directors. I hereby accept the appointment as registered
		P \ . \ .	ida otararos.	415198
SIGNATURE Signature, type	d or pointed name of registered agent and t		Registered Agent signature r	
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE Sugar	onne Arnaud	DELETE	1.1 TITLE	President Secy, Trees & Change Addition
NAME CTOS	igent Hillson	•	1.2 NAME	Jill E. Futterman
, -	OCEAN BLVD.		1.3 STREET ADDRESS	IMOIDA Noshing way
	RATON FL 33432		1.4 CITY-ST-ZIP	Deleay Beach, FL 33484
TITLE	TOTOTT E COTOE	DELETE	21 TITLE	Change Addition
NAME			2 2 NAME	- Vitalijo
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP	·- <u>-</u>	Detett	2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADORESS			3.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		3.4. CITY-ST-ZIP	
TITLE		[_] DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	4 ¢
STREET ADDRESS			5.3 STREET ADDRESS	シェック
CITY-ST-ZIP			5.4 CITY-ST-ZIP	4.23
TITLE		DELETE	6.1 TITLE	[10][10][24][31][Inange Addition
NAME			6.2 NAME	-04/23/9801079009
STREET ADORESS			6.3 STREET ADDRESS	***150.00
				でです。1 (10) 2 (10)
CITY-ST-ZIP	o information evention with the	e filipe door not quelle : 4	6.4 CITY-ST-ZIP	Lin Continu (10 07/2VI) Florido Clatutes I forther and forther than
	ne information supplied with thi	s filing does not qualify for		in Section 119.07(3)(i), Florida Statutes. I further certify that the information

ble incurred amount report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am at the occurrence of the report is report as required by Chapter 607, Florida Statutes; and that my name appears in a nating in with an address. officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or an an attriction