

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000098951

1. Entity Name

MAGNETIC CORPORATION

Principal Place of Business

8910 N. DALE MABRY HWY
SUITE 16
TAMPA FL 33614
US

Mailing Address

8910 N. DALE MABRY HWY
SUITE 16
TAMPA FL 33614
US

2. Principal Place of Business

18302 Highwoods Preserve Parkway

3. Mailing Address

18302 Highwoods Preserve Parkway

Suite, Apt. #, etc.

SUITE 204

Suite, Apt. #, etc.

SUITE 204

City & State

TAMPA, FL

City & State

TAMPA, FL

Zip

FL 33647

Country

USA

Zip

33647

Country

USA

6. Name and Address of Current Registered Agent

BAKUNAS, DARIUS V
4218 CARTNAL AVE
TAMPA FL 33624

7. Name and Address of New Registered Agent

Name

ADDRESS CHANGE ONLY

Street Address (P.O. Box Number is Not Acceptable)

18302 Highwoods Preserve Parkway, Suite 204
Tampa, Florida 33647

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01/10/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VTS
NAME BAKUNAS, DARIUS V ☐ Delete
STREET ADDRESS 4218 CARTNAL DR.
CITY-ST-ZIP TAMPA FL 33624

TITLE P
NAME BAKUNAS, KENNETH ☐ Delete
STREET ADDRESS 16360 ASHINGTON PARK DR
CITY-ST-ZIP TAMPA FL 33647

TITLE D
NAME BAKUNAS, JENNIFER ☐ Delete
STREET ADDRESS 16360 ASHINGTON PARK DR
CITY-ST-ZIP TAMPA FL 33647

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VTS
NAME BAKUNAS, DARIUS V. ☒ Change ☐ Addition
STREET ADDRESS 18302 Highwoods Preserve Parkway, Suite 204
CITY-ST-ZIP Tampa, Florida 33647

TITLE P
NAME BAKUNAS, KENNETH ☒ Change ☐ Addition
STREET ADDRESS 18302 Highwoods Preserve Parkway, Suite 204
CITY-ST-ZIP Tampa, Florida 33647

TITLE D
NAME BAKUNAS, JENNIFER ☒ Change ☐ Addition
STREET ADDRESS 18302 Highwoods Preserve Parkway, Suite 204
CITY-ST-ZIP Tampa, Florida 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DARIUS V BAKUNAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/10/01

Date

(813) 932-9675

Daytime Phone #

0347602

CR2E034 (10/00)

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90019 016 ***150.00



DO NOT WRITE IN THIS SPACE