2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083711

Entity Name: MAGOO SR, CORPORATION

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
198 NW 7 MIAMI, FL	79 STREET _ 33150			
Current I	Mailing Addre	ess:	New Mailing Address	s:
198 NW 7 MIAMI, FL	79 STREET _ 33150			
FEI Numbe	er: 65-0995633	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name an	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
	ELL, JOEL 79 STREET _ 33150 US	3		
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
	te of Florida. JRE:			d office or registered agent, or both,
in the Sta	te of Florida. JRE:	submits this statement for the points Signature of Registered Ag		d office or registered agent, or both, Date
in the Sta SIGNATL In accorda	te of Florida. JRE: Electro nce with s. 607.1		ent	
in the Sta SIGNATL In accorda Election Ca	te of Florida. JRE: Electro nce with s. 607.1	onic Signature of Registered Ag 93(2)(b), F.S., the corporation did nong Trust Fund Contribution ().	ent ot receive the prior notice.	
in the Sta SIGNATL In accorda Election Ca	te of Florida. JRE: Electro nce with s. 607.1 ampaign Financia RS AND DIREC PD (BARBANELL, 19111 COLLIII	onic Signature of Registered Ag 93(2)(b), F.S., the corporation did no ng Trust Fund Contribution (). CTORS:	ent ot receive the prior notice.	Date
in the Sta SIGNATL In accorda Election Ca OFFICEF Title: Name: Address:	te of Florida. JRE: Electro nce with s. 607.1 ampaign Financi RS AND DIREC PD (BARBANELL, 19111 COLLII SUNNY ISLES DIR (BARBANELL, 19111 COLLII	onic Signature of Registered Ag 93(2)(b), F.S., the corporation did nong Trust Fund Contribution (). CTORS:) Delete JOEL NS AVE APT 2507 6 BEACH, FL 33160) Delete MARISELA NS AVE, APT 2507	ent ot receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEL BARBANELL PRES 05/01/2008