

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000000233

Entity Name: AJ'S MAGIC, INC.

FILED
Dec 08, 2006
Secretary of State

Current Principal Place of Business:

1859 CONSTITUTION DRIVE
NAVARRE, FL 32566

New Principal Place of Business:

2011 FLAMINGO LANE
NAVARRE, FL 32566

Current Mailing Address:

P O BOX 5670
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-3551286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVISON, CARROLL S
1828 SUNDOWN DR
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

LEVISON, CARROLL S
2011 FLAMINGO LANE
NAVARRE, FL 32566 US

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: CARROLL S. LEVISON

12/08/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: LEVISON, CARROLL S
Address: 1828 SUNDOWN DR
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: LEVISON, CARROLL S
Address: 2011 FLAMINGO LANE
City-St-Zip: NAVARRE, FL 32566

I hereby certify that the information supplied with this filing does not qualify for the 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: CARROLL S. LEVISON

PTSD

12/08/2006

Electronic Signature of Signing Officer or Director

Date