

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2000 08:00 AM****Secretary of State****DOCUMENT # P99000008172****1. Entity Name****SPECIAL MAGIC WORKS, INC.****Principal Place of Business**

1000 RIVER REACH DRIVE #405

FORT LAUDERDALE
33315

FL

Mailing Address

1000 RIVER REACH DRIVE #405

FORT LAUDERDALE
33315

FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number**65-0907396****Applied For****Not Applicable****5. Certificate of Status Desired**☒**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**DAVIDOW BRUCE
1000 RIVER REACH DRIVE #405FORT LAUDERDALE
33315

FL

7. Name and Address of New Registered Agent**Name**

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

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)

04/30/2000

DATE

**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, 2000 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
TREA
DAVIDOW BRUCE
1000 RIVER REACH DRIVE #405
FORT LAUDERDALE FL 33315TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC
WOODING III CLINTON H
3019 SW 68TH AVENUE
MIRAMAR FL 33023TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WOODING III CLINTON H
3019 SW 68TH AVENUE
MIRAMAR FL 33023TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES
DAVIDOW BRUCE
1000 RIVER REACH DRIVE #405
FORT LAUDERDALE FL 33315TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: BRUCE DAVIDOW****PPES 04/30/2000**