

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000043252

1. Entity Name
MAGNUM ENTERPRISES, INC.



Principal Place of Business
1666 JOHN F. KENNEDY CAUSEWAY
SUITE #606
NORTH BAY VILLAGE, FL 33141

Mailing Address
1666 JOHN F. KENNEDY CAUSEWAY
SUITE #606
NORTH BAY VILLAGE, FL 33141

FILED

05 MAY -9 PM 5: 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01172005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0921839

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

NO

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SLOTA, SCOTT
1666 JOHN F. KENNEDY CAUSEWAY
SUITE #606
NORTH BAY VILLAGE, FL 33141

DO NOT WRITE
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/17/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
PCEO
SLOTA, SCOTT
STREET ADDRESS
1666 JOHN F. KENNEDY CAUSEWAY, SUITE #606
CITY-ST-ZIP
MIAMI, FL 33141

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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05/09/05--01001--010 **1175.00

DO NOT WRITE
IN THIS SPACE

AB 5/26

\$150

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Scott

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/05

Date

305-868-8778

Daytime Phone #