2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: X

May 06, 2005 08:00 AN Secretary of State DOCUMENT # P99000C14821 MAGIC PRESS CORPORATION Mailing Address Principal Place of Business 2612 NW 21ST TERRACE 2612 NW 21ST TERRACE MIAMI, FL 33142 MIAMI, FL 33142 CR2E034 (10/03) 01182005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0920115 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MORALES, LUIS F 5705 W 20 AVE APT 303 HIALEAH, FL 33012 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. Signature, typed or printed name of registered agent and title if applicable, (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. TITLE MORALES, LUIS F NAME 5705 W 20 AVE APT 303 STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 informatinolicated on this report or suppliemental 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 directly 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 changed, or on an attachment with an address, with all other like empowered.

FILED