2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000058393

Entity Name: MAGIC CITY MEDIA CENTER, INC.

FILED Mar 13, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 142 WINTER RIDGE CIRCLE ORLANDO, FL 32835 **Current Mailing Address: New Mailing Address:** 142 WINTER RIDGE CIRCLE ORLANDO, FL 32835 FEI Number: 59-3597137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PULLEN, KIM KELLY PULLEN, KIM K 142 WINTER RIDGE CIRCLE 142 WINTER RIDGE CIRCLE ORLANDO, FL 32835 ORLANDO, FL 32835 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: KIM K PULLEN 03/13/2003 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition PULLEN, KIM K Name: Name: 142 WINTER RIDGE CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PULLEN, RUSS Name: 142 WINTER RIDGE CIRCLE Address: Address: ORLANDO, FL 32835 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KIM K PULLEN PTS 03/13/2003