

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000078674**

1. Entity Name

**NET MAGIC INTERNATIONAL, INC.**

Principal Place of Business

5 N. San Pablo Circle  
Jacksonville, FL 32250

Mailing Address

Same

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAMUEL R. RENER  
5 N. San Pablo Circle  
Jacksonville, FL 32250

Name SPIEGEL & UTRERA, P.A.

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

City Coral Gables

FL

Zip Code 33134

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.

**SPIEGEL & UTRERA, P.A.**

SIGNATURE

By:

*Natalia Utrera, Vice President*

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME PD  
STREET ADDRESS Samuel R. Rener  
CITY-ST-ZIP 5 N. San Pablo Circle  
Jacksonville, FL 32250 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
**700003496217**  
**-12/12/00-01005-011**  
**\*\*\*\*150.00 \*\*\*\*150.00**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Samuel R. Rener, Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

P.1

FILED

00 NOV 28 PM 2:21

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

CR2E034 (9/99)

KE

**AFFIDAVIT IN SUPPORT OF REQUEST TO  
WAIVE THE FLORIDA DEPARTMENT OF STATE  
CORPORATE REINSTATEMENT FEES**

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STATE OF FLORIDA     )  
                                  )  
COUNTY OF DUVAL    )

1. Samuel R. Rener is the President of NET MAGIC INTERNATIONAL, INC. a Florida corporation, (hereinafter "Corporation").

2. That the Corporation was administratively dissolved by the Florida Department of State on September 22, 2000.

3. That the Corporation failed to file its 2000 Annual Report or pay the 2000 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:

3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,

3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.

4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2000 Annual Report fees and the filing of its 2000 Annual Report, which are presented simultaneously with this Affidavit.

5. NET MAGIC INTERNATIONAL, INC. satisfies the requirements of the Florida Statutes 607.0401.

6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: \_\_\_\_ day of November, 2000

**FURTHER, AFFIANT SAYETH NOT**

NET MAGIC INTERNATIONAL, INC

By: \_\_\_\_\_

Samuel R. Rener

FL R 560 796 65 184-0

**SWORN AND SUBSCRIBED**

before me this 15<sup>th</sup> day of November, 2000.

*Nancy F. Mortory*

Notary Public, State of Florida at Large

Printed Name: *Nancy F. Mortory*

Commission Expires: *Sept 16, 2001*



Nancy F. Mortory  
MY COMMISSION # CC681310 EXPIRES  
September 16, 2001  
BONDED THRU TROY FAIR INSURANCE, INC