

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2002 8:00 am
Secretary of State

08-21-2002 90084 010 ***150.00

DOCUMENT # P99000095414

1. Entity Name
MAGIFF INTERNATIONAL, INC.

Principal Place of Business

**8406 NW 17TH ST.
 MIAMI FL 33126**

Mailing Address

**8406 NW 17TH ST.
 MIAMI FL 33126**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0968746**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LOPEZ, ADALBERTO
 10871 N.W. 4TH DRIVE
 CORAL SPRINGS FL 33071**

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. 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)

DATE

08/16/02

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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 **P** ☐ Delete
 NAME **GIFFUNI, FRANCISCO M**
 STREET ADDRESS **8401 NW 102ND AVE BAY 104**
 CITY-ST-ZIP **SUNRISE FL 33351**

TITLE ☐ Change ☐ Addition
 NAME **GIFFUNI, FRANCISCO M.**
 STREET ADDRESS **8406 N.W. 17th. St.**
 CITY-ST-ZIP **MIAMI, FL. 33126**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/16/02
 Date

(305) 468-1635
 Daytime Phone #

CR2E034 (4/02)



Attachment

#999000095414
124132

8406 NW 17 Street

August 16, 2002

Miami, Florida 33126

Florida Department of State
Division of Corporations

Florida State

(305) 468-1635

(305) 468-1636

(305) 468-1637

Toll Free

1(877) 9-MAGIFF (962-4433)

Fax

(305) 599-7700

E-mail

Magiff@aol.com

Look us up on the web

www.magiff.com

FOR AN AESTHETIC UNIVERSE

To Whom It May Concern:

This letter is to kindly ask you to please accept our report due to the fact that we didn't receive the last report because we moved to another location.

Do not hesitate to call us if you have any questions.

Sincerely,


Francisco M. Giffuni
President