

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095948

Entity Name: M.G.N.A. INC.

FILED
Jan 14, 2004
Secretary of State

Current Principal Place of Business:

217 NORTH FED HWY
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

217 NORTH FED HWY
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 65-0962475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLASTNOX, NICKOLAY
3240 S OCEAN DR #903
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

SLASTNOY, NICKOLAY
3140 S OCEAN DR #903
HALLANDALE, FL 33009 US

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: NICKOLAY SLASTNOY

01/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GALKIN, MIKHAIL
Address: 266 191 STR
City-St-Zip: MIAMI, FL 33110

Title: P () Delete
Name: SLASTNOY, NICKOLAY
Address: 3140 S OCEAN DRIVE #903
City-St-Zip: HALLANDALE, FL 33009

Title: VP () Delete
Name: KRIVTCHENKO, NATALIA
Address: 1000 PARKVIEW # 625
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: GALKIN, MIKHAIL
Address: 266 191 STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GALKIN, NATALIA
Address: 266 191 STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: NICKOLAY SLASTNOY

PRES

01/14/2004

Electronic Signature of Signing Officer or Director

Date