

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000104239

Entity Name: MAGKOR INDUSTRIES, INC.

FILED  
Apr 24, 2006  
Secretary of State

## Current Principal Place of Business:

476 SUGAR RIDGE CT.  
LONGWOOD, FL 32779

## New Principal Place of Business:

## Current Mailing Address:

476 SUGAR RIDGE CT.  
LONGWOOD, FL 32779

## New Mailing Address:

FEI Number: 65-1008597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRUS, GIOVANNI  
476 SUGAR RIDGE CT.  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRUS, GIOVANNI  
Address: 476 SUGAR RIDGE CT.  
City-St-Zip: LONGWOOD, FL 32779

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: BRUS, GIOVANNI  
Address: 476 SUGAR RIDGE COURT  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP/D ( ) Change (X) Addition  
Name: HEARN, LEE  
Address: 1028 WESTWARD DRIVE  
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: S/D ( ) Change (X) Addition  
Name: DIXON, GREG  
Address: 3907 SKIPPER ROAD  
City-St-Zip: SEBRING, FL 33875 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GIOVANNI BRUS

P/D

04/24/2006

Electronic Signature of Signing Officer or Director

Date