

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14343

FILED
Mar 29, 2007
Secretary of State

Entity Name: MAG MANUFACTURING & TRADING COMPANY, INC.

Current Principal Place of Business:

19889 VILLA MEDICI PLACE
BOCA RATON, FL 33434

New Principal Place of Business:

3100 N. W. BOCA RATON BOULEVARD
#406
BOCA RATON, FL 33431

Current Mailing Address:

19889 VILLA MEDICI PLACE
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 65-0227478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GICHI, FAWAZ
19889 VILLA MEDICI PLACE
BOCA RATON, FL 33434 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: DV () Delete
Name: GICHI, MOHAMMAD A.,
Address: 5596 GOLDEN EAGLE CR.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DP () Delete
Name: GICHI, FAWAZ
Address: 19889 VILLA MEDICI PLACE
City-St-Zip: BOCA RATON, FL 33434

Title: V () Delete
Name: GICHI, FOUAD
Address: 19889 VILLA MEDICI PLACE
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: FAWAZ GICHI

DP

03/29/2007

Electronic Signature of Signing Officer or Director

Date