APR 29 '97 12:42PM

FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V98839

1. Corporation Name: Magnetix Corporation

Principal Place of Business / Mailing Address:

770 W. Bay Street
Winter Garden, FL 34787

3. Date Incorporated or Qualified: 23 Jan 92
3a. Date of Last Report: May 1996

2. Principal Place of Business — 21: Same As Above; Suite, Apt. #, etc. — 22; City & State — 23; Zip — 24; County — 25
2a. Mailing Address — 26: Same As Above; Suite, Apt. #, etc. — 27; City & State — 28; Zip — 29; County — 30

4. FEI Number: 59-3127435 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: XX — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: XX Yes ☐ No

9. Name and Address of Current Registered Agent:

Mr. Martin Stamp
Kilgore, Pearlman, Gardner, Ornstein & Stamp PA
940 Highland Ave.
Orlando, FL 34787

10. Name and Address of New Registered Agent:

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE
(Signature, name or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when name changed)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
President Robert J. LeFort Jr. 4701 NE Spinaker Point Stuart FL 34996			
Treasurer Laurie Kolbeins 111 Kenlworth Road Villanova, PA 19085	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
Controller Harold E. Roberts 221 Harbor Dr. Winter Garden, FL 34787	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
Vice President/Secretary Thomas E. Curry 606 Longchamps Dr. Devon, PA 19333-1866	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	Vice President Thomas E. Curry 606 Langchamps Dr. Devon, PA 19333-1866 XX Change ☐ Addition
	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	Secretary William A. Hohns 398 Lakepoint Trail Oviedo, FL 32765 ☐ Change XX Addition
	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, added or deleted.

SIGNATURE: _____ 4/30/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #