# above, or on an attachment with all other like empowered.

SIGNATURE: LISA ZIGMONT

Electronic Signature of Signing Officer/Director Detail

Entity Name: ZIGMONT MAGIC F/X, INC.

#### **Current Principal Place of Business:**

1206 BARONWOOD PLACE BRANDON, FL 33510

## **Current Mailing Address:**

**1517 BURNING TREE LANE** BRANDON, FL 33510 US

## FEI Number: 59-3700575

#### Name and Address of Current Registered Agent:

ZIGMONT, LISA KS/T 1517 BURNING TREE LANE BRANDON, FL 33510 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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	Ρ	Title	ST
Name	ZIGMONT, STEVEN P	Name	ZIGMONT, LISA K
Address	1206 BARONWOOD PLACE	Address	1206 BARONWOOD PLACE
City-State-Zip:	BRANDON FL 33510	City-State-Zip:	BRANDON FL 33510

I hereby 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

SEC/TREASURER

01/15/2020 Date

FILED Jan 15, 2020 Secretary of State 8903151107CC

Date

Certificate of Status Desired: Yes