

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000146939

Entity Name: MAGNETIC MILES, INC.**Current Principal Place of Business:**32-C SE OSCEOLA STREET
STUART, FL 34994**Current Mailing Address:**32-C SE OSCEOLA STREET
STUART, FL 34994**FEI Number:** 26-4327324**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHARLES E. HEATH CPA, PA
32-C SE OSCEOLA
SUITE C
STUART, FL 34994 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

Date

Officer/Director Detail :

Title D
Name MILES, STEVEN
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

Title D
Name CRISTOFORO, MICHAEL
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

Title D
Name DAVIDS, DAN
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

Title D
Name BARATTA, DR ROBERT
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

Title D
Name BISCHOFF, PATRICK
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

Title D
Name MADDEN, JOHN
Address 32-C SE OSCEOLA STREET
City-State-Zip: STUART FL 34994

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

SIGNATURE: MICHAEL CRISTOFORO

D

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date