

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000053877

**FILED  
Feb 18, 2019  
Secretary of State  
4793064377CC**

**Entity Name:** MAGIC REALITY GROUP INC

**Current Principal Place of Business:**

1001 BRICKELL BAY DRIVE  
SUITE 1400  
MIAMI, FL 33131

**Current Mailing Address:**

1001 BRICKELL BAY DRIVE  
SUITE 1400  
MIAMI, FL 33131 US

**FEI Number:** 37-1832987

**Certificate of Status Desired:** No

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

CAHLIN, RICHARD A CPA  
1001 BRICKELL BAY DRIVE  
SUITE 1400  
MIAMI, FL 33131 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,M  
Name RATNIKOV, EDUARD  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title DM  
Name KHASIEV, REMAR  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title D,M  
Name PETRUSHIN, SERGEY  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title D,M  
Name CHRISTYAKOV, DMITRIY  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title M  
Name LIKHTENFELD, ILYA  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title M  
Name CAPUTO, MICHAEL  
Address 1001 BRICKELL BAY DRIVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

*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:** RATNIKOV , EDUARD

**MGR**

**02/18/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date