

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 07, 2003 8:00 am
Secretary of State

07-07-2003 90140 014 ***550.00

DOCUMENT # F02000006028

1. Entity Name
MAGIX COMPUTER PRODUCTS INTERNATIONAL CO.



Principal Place of Business
**1 EAST FIRST STREET
RENO NV 89501**

Mailing Address
**1680 MICHIGAN AVENUE, #900
MIAMI BEACH FL 33139**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **86-0863410**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NIERMANN, MICHAEL
1680 MICHIGAN AVENUE, #900
MIAMI BEACH FL 33139**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCD
JARON, JUERGEN
1680 MICHIGAN AVENUE, #900
MIAMI BEACH FL 33139** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCD
REIN, ERHARD
1680 MICHIGAN AVE #900 FL
MIAMI BEACH 33139** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
NIERMANN, MICHAEL
1680 MICHIGAN AVENUE, #900
MIAMI BEACH FL 33139** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**NIERMANN, MICHAEL
5515 LA GORCE DR
MIAMI BEACH FL 33140** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
REIU, DIETER
1680 MICHIGAN AVENUE, #900
MIAMI BEACH FL 33139** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
REIN, ERHARD
1680 MICHIGAN AVE #900 FL
MIAMI BEACH 33139** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED NIERMANN, MICHAEL

Date

Daytime Phone #

**305-695-6363
7/3/03**

CR2E034 (4/03)