

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006028

FILED  
Jan 13, 2004  
Secretary of State

Entity Name: MAGIX COMPUTER PRODUCTS INTERNATIONAL CO.

## Current Principal Place of Business:

1 EAST FIRST STREET  
RENO, NV 89501

## New Principal Place of Business:

600 NEIL ROAD  
ST 500  
RENO, NV 89511

## Current Mailing Address:

1680 MICHIGAN AVENUE, #900  
MIAMI BEACH, FL 33139

## New Mailing Address:

FEI Number: 86-0863410      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: REIN, ERHARD  
Address: 1680 MICHIGAN AVENUE, #900  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete  
Name: NIERMANN, MICHAEL  
Address: 5515 LA GORCE DR.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete  
Name: REIN, ERHARD  
Address: 1680 MICHIGAN AVENUE, #900  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL NIERMANN

SD

01/13/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date