MAGIC COMMUNICATIONS INC Form 3 April 23, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person <u>*</u> HOHMA			2. Date of Event Requiring Statement (Month/Day/Year)				ing Symbol NS INC [MAGN.OB]	
(Last)	(First)	(Middle)	04/12/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
1179 CENT	(Street)			X Directo X Officer (give title belo		Owner	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Reporting Person Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Secur (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	1	
Common Ste	ock		12,700,080	0	D	Â		
Reminder: Repo owned directly	-		ch class of securities benefic	ially S	SEC 1473 (7-02)		
	infor requ	mation contaired to respo	pond to the collection of ained in this form are not and unless the form displ MB control number.	t				
г	able II - Do	erivative Secu	rities Beneficially Owned (e	.g., puts, calls	, warrants, opt	ions, c	onvertible securities)	

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	Ownership Be	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB APPROVAL

Estimated average burden hours per

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January 31,

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Number:

Expires:

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Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Add	ress	Relationships						
1 0		irector	ctor 10% Owner Officer		Other			
HOHMAN EDWARD A 1179 CENTER POINT DRI HENDERSON, NV 890		ÂX	ÂX	Chairman, President	Â			
Signatures								
/s/ Edward A. Hohman	04/23/2007							
<u>**</u> Signature of Reporting Person	Date							

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.