

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098689

Entity Name: MAWULI, INC.

Current Principal Place of Business:

545 NW 99 STREET
MIAMI, FL 33150

Current Mailing Address:

P.O. BOX 6593
MIAMI, FL 33141

FEI Number: 65-1144409

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUGUSTIN, ONICKEL
545 NW 99 STREET
MIAMI, FL 33150 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 P
Name AUGUSTIN, ONICKEL H
Address 545 NW 99 STREET
City-State-Zip: MIAMI FL 33150

Title TS
Name DAVIS, JOHNATHAN
Address 545 NW 99 STREET
City-State-Zip: MIAMI FL 33150

Title VP
Name SAINTUS, MARIE
Address 545 NW 99 STREET
City-State-Zip: MIAMI FL 33150

Title S
Name AUGUSTIN, ONICKEL
Address 545 NW 99 STREET
City-State-Zip: MIAMI FL 33150

Title ASST. TREASURER
Name BERNADETTE, CHEREMONT
Address 545 NW 99 STREET
City-State-Zip: MIAMI FL 33150

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: AUGUSTIN, ONICKEL

PRESIDENT

01/27/2013

Electronic Signature of Signing Officer/Director Detail

Date