

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000084121

**Entity Name:** MANDARA SPA (HAWAII), LLC

**Current Principal Place of Business:**

2005 KALIA ROAD  
KALIA TOWER  
HONOLULU, HI 96815

**Current Mailing Address:**

770 SOUTH DIXIE HWY  
STE 200  
CORAL GABLES, FL 33146 US

**FEI Number:** 36-4365669

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** AMY S. ZEIGLER

03/21/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT, CEO, DIRECTOR  
Name            FLUXMAN, LEONARD I  
Address        770 SOUTH DIXIE HIGHWAY, SUITE  
                  200  
City-State-Zip: CORAL GABLES FL 33146

Title            SVP, CFO, DIRECTOR  
Name            LAZARUS, STEPHEN  
Address        770 SOUTH DIXIE HIGHWAY, SUITE  
                  200  
City-State-Zip: CORAL GABLES FL 33146

Title            SECRETARY, VP, DIRECTOR  
Name            BOEHM, ROBERT C  
Address        770 SOUTH DIXIE HIGHWAY, SUITE  
                  200  
City-State-Zip: CORAL GABLES FL 33146

Title            MEMBER  
Name            STEINER U.S. HOLDINGS, INC.  
Address        770 SOUTH DIXIE HIGHWAY, SUITE  
                  200  
City-State-Zip: CORAL GABLES FL 33146

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT C. BOEHM

SECRETARY

03/21/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date