

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90122 016 ***150.00

DOCUMENT # P00000051386

1. Entity Name

MANTRA SOUNDS, INC.

Principal Place of Business

**331 NORTHEAST 48TH TERRACE
 MIAMI FL 33137**

Mailing Address

**331 NORTHEAST 48TH TERRACE
 MIAMI FL 33137**

00052536



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

161 NE 22nd St

3. Mailing Address

161 NE 22nd St

Suite, Apt. #, etc.

Miami, FL 33137

Suite, Apt. #, etc.

Miami, FL 33137

City & State

City & State

4. FEI Number

65-1011029

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

Jason Klein CPA

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

8306 Mills Dr. # 249

City

Miami

FL

Zip Code

33183

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ Delete
 NAME **MOORE, MARLON**
 STREET ADDRESS **331 NORTHEAST 48TH TERRACE**
 CITY-ST-ZIP **MIAMI FL 33137**

TITLE **VTD** ☐ Delete
 NAME **GALLEGO, JUAN D**
 STREET ADDRESS **331 NORTHEAST 48TH TERRACE**
 CITY-ST-ZIP **MIAMI FL 33137**

TITLE **Michael Sinisgall** ☐ Delete
 NAME **Michael Sinisgall**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **JOSE ELIAS** ☐ Delete
 NAME **JOSE ELIAS**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **161 NE 22nd St.**
 STREET ADDRESS **Miami, FL 33137**
 CITY-ST-ZIP **Miami, FL 33137**

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 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marlon Moore

4-15-01

305-576-6882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)