FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91469 040 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000005405

1. Entity Name
MANALI INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
800 Brickell Ave		800 Brickell Ave	
Suite, Apt. #, etc. 1109		Suite, Apt. #, etc. 1109	
City & State: Miami FL		City & State: Miami FL	
Zip 33131	Country USA	Zip 33131	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0995002 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: GERMAN OSORIO

Street Address (P.O. Box Number is Not Acceptable): 800 Brickell Ave Suite 1109

City: Miami FL Zip Code 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: German Osorio / GERMAN OSORIO / D&CEO / 4/24/03

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ — **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D & CEO	TITLE	
NAME	GERMAN OSORIO	NAME	
STREET ADDRESS	800 Brickell Ave; Suite 1109	STREET ADDRESS	
CITY-ST-ZIP	Miami FL 33131	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	

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CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: German Osorio / GERMAN OSORIO / 4/24/03 786-3160661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #