

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012930

FILED
Mar 30, 2004
Secretary of State

Entity Name: MANDARIN LIBRARY AUTOMATION, INC.

Current Principal Place of Business:

1060 HOLLAND DR
#3G
BOCA RATON, FL 33487

Current Mailing Address:

1060 HOLLAND DR
#3G
BOCA RATON, FL 33487

New Principal Place of Business:

1060 HOLLAND DR
SUITE 3G
BOCA RATON, FL 33487

New Mailing Address:

1060 HOLLAND DR
SUITE 3G
BOCA RATON, FL 33487

FEI Number: 65-1092962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, W.RODGERS
2424 N. FEDERAL HWY., STE. 456
BOCA RATON, FL 33431

Name and Address of New Registered Agent:

MOORE, W.RODGERS
1900 GLADES RD
SUITE 401
BOCA RATON, FL 33431

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:

03/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLDSTEIN, ELLIOT
Address: 3210 JASMINE CT.
City-St-Zip: DEL RAY BEACH, FL 33483

Title: D () Delete
Name: GOLDSTEIN, ELEANOR
Address: 3210 JASMINE CT.
City-St-Zip: DEL RAY BEACH, FL 33483

Title: P () Delete
Name: LAZO, LEONARDO
Address: 7597 FAIRWAY TRAIL
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Delete
Name: SCHROEDER, DIANE
Address: 3533 HARBOR CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP () Delete
Name: KAPLANIAN, HARRY
Address: 19220 NATURES VIEW COURT
City-St-Zip: BOCA RATON, FL 33498

Title: VP () Delete
Name: GRAHAM, ART
Address: 7100 CHESAPEAKE CIRCLE
City-St-Zip: BOYNTON BEAC, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHRISTINE DIVITO

AT

03/30/2004

Electronic Signature of Signing Officer or Director

Date

CHRISTINE DIVITO, ASST TREASURER
21538 ST ANDREWS GRAND CIRCLE
BOCA RATON, FL 33486