

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90319 047 ***150.00

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1. Entity Name
MANDALAY HOLDINGS, INC.



Principal Place of Business
**1150 NW 72ND AVE
MIAMI, FL 33126**

Mailing Address
**1150 NW 72ND AVE
MIAMI, FL 33126**

50044304



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04132005 Chg-P CR2E034 (10/03)

City & State

4. FEI Number
65-1146233

Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**BRODIE, SIDNEY Z
7270 NW 12TH STREET, PH-1
MIAMI, FL 33155**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PS
NAME REYES, RAFAEL ☐ Delete
STREET ADDRESS 7300 SW 117 TERR
CITY-ST-ZIP MIAMI, FL 33156

TITLE P
NAME LAPO, ALEJANDRO ☐ Delete
STREET ADDRESS 5025 COLLINS AVE 10TH FLOOR
CITY-ST-ZIP MIAMI, FL 33140

TITLE T
NAME MIRANDA, DANIEL ☒ Delete
STREET ADDRESS 11045 SW 73CT
CITY-ST-ZIP MIAMI, FL 33156

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPS ☒ Change ☐ Addition
NAME RAFAEL REYES JR.
STREET ADDRESS 7300 SW 117 TERR
CITY-ST-ZIP MIAMI, FL 33166

TITLE P ☒ Change ☐ Addition
NAME ALEJANDRO, CAPO
STREET ADDRESS 5025 COLLINS AVE 10TH FLOOR
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE T ☐ Change ☒ Addition
NAME SEAN GRIMBERG
STREET ADDRESS 6680 S W , MIAMI. FL 33156

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/04