

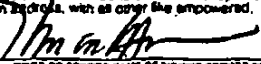
JUL-8-2008 01:18P FROM:

4077061379

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Jul 11, 2008 8:00 am
Secretary of State

07-11-2008 90016 013 ***150.00

**2008 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P03000035546			
1. Entity Name MANDARIN PLAZA, INC.			
Principal Place of Business 5510 W COLONIAL DRIVE ORLANDO, FL 32808		Mailing Address 5510 W COLONIAL DRIVE ORLANDO, FL 32808	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc. Suite 103		Suite, Apt. #, etc. Suite 103	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 01-0775403		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FONG, DAVID 105 E SR 434 WINTER SPRINGS, FL 32708		None	
8. The above named entity submits the 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.		Street Address (P.O. Box Number is Not Acceptable)	
SIGNATURE _____		City FL Zip Code	
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PO ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TANG, MATTHEW	NAME	
STREET ADDRESS	8355 DIAMOND COVE CR	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 32838	CITY-ST-ZIP	
TITLE	VO ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	VAN TANG, THUONG	NAME	
STREET ADDRESS	8355 DIAMOND COVE CR	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 32838	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 affidavit, with all other like empowered.			
SIGNATURE: 		6/16/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

40110287



04092008 Chg-P CR2E034 (12/08)