

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008 8:00 am
Secretary of State

01-17-2008 90022 039 ***150.00

DOCUMENT # P03000101510

1. Entity Name
MANDALAY PROPERTIES, INC.



Principal Place of Business
**205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480**

Mailing Address
**205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

01152008 Chg-P CR2E034 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0282524

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRIAN, PHILIPPE J
205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480**

7. Name and Address of New Registered Agent

Name **PHILIPPE J. BRIAN, P.A.**

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

205 WORTH AVENUE

SUITE 303

City **PALM BEACH**

FL

Zip Code

33480-4618

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 **Philippe J. Brian**

PHILIPPE J. BRIAN, P.A.

01-15-08

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

(NOTE: Registered Agent signature required when renewing)

DATE

**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

TITLE **DPT** ☐ Delete
NAME **MILLEZ, JEAN**
STREET ADDRESS **7989 CRANES POINT**
CITY - ST - ZIP **WEST PALM BEACH, FL 33412**

TITLE **VP** ☐ Delete
NAME **CHOL, ISABELLE**
STREET ADDRESS **7989 CRANES POINT**
CITY - ST - ZIP **WEST PALM BEACH, FL 33412**

TITLE **S** ☐ Delete
NAME **BRIAN, PHILIPPE J**
STREET ADDRESS **205 WORTH AVENUE**
CITY - ST - ZIP **PALM BEACH, FL 33480**

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

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

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CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **Philippe J. Brian** **PHILIPPE J. BRIAN** **01-15-08** **561-2144445**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #