

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157626

FILED
Apr 30, 2009
Secretary of State

Entity Name: MANDARIN ENTERTAINMENT INC.

Current Principal Place of Business:

16545 SW 61 LANE
MIAMI, FL 33193

New Principal Place of Business:

Current Mailing Address:

16545 SW 61 LANE
MIAMI, FL 33193

New Mailing Address:

FEI Number: 56-2544339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBROWOLSKI, SIMONI
29850 SW 209 AVE
REDLAND, FL 33030 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RODGERS, INGRID
Address: 16545 SW 61 LANE
City-St-Zip: MIAMI, FL 33193

Title: V () Delete
Name: DOBROWOLSKI, EDWARD
Address: 16545 SW 61 LANE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DOBROWOLSKI, EDWARD
Address: 16545 SW 61 LANE
City-St-Zip: MIAMI, FL 33193

Title: V (X) Change () Addition
Name: RODGERS, DEL R. INGRID
Address: 16545 SW 61 LANE
City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDWARD DOBROWOLSKI

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date