

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90041 007 ***150.00

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1. Entity Name
MANGO CORPORATE, INC.



Principal Place of Business
**925 SOUTH FEDERAL HIGHWAY
SUITE 425
BOCA RATON, FL 33432**

Mailing Address
**925 SOUTH FEDERAL HIGHWAY
SUITE 425
BOCA RATON, FL 33432**

*P.O. Box 11229
Knoxville, TN 37939*



01222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4837065

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BLALOCK, WALTERS, HELD & JOHNSON, P.A.
802 11TH STREET WEST
BRADENTON, FL 34205-7734**

**DO NOT WRITE
IN THIS SPACE**

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, 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
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LEVIN, STEVEN
925 SOUTH FEDERAL HIGHWAY #425
BOCA RATON, FL 33432**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
KAYDEN, BERNARD H
550 MAMARONECK AVENUE #404
HARRISON, NY 10528**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SCHWARTZ, THOMAS H
60 EAST 42ND STREET 53RD FLOOR
NEW YORK, NY 10165**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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:

Steven Levin, President

(561) 948-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #