

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025102

Entity Name: MANGO NATURAL CAFE, INC.

FILED
Feb 27, 2008
Secretary of State

Current Principal Place of Business:

20533 BISCAYNE BLVD.
STE 4147
AVENTURA, FL 33180-152 US

New Principal Place of Business:

Current Mailing Address:

20533 BISCAYNE BLVD.
STE 4147
AVENTURA, FL 33180-152 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISHYEV, ALLA
20533 BISCAYNE BLVD.
STE 117
AVENTURA, FL 33180 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: RAFAILYAN, ANAIDA
Address: 20533 BISCAYNE BLVD STE 4147
City-St-Zip: AVENTURA, FL 33180 US

Title: VP () Delete
Name: MISHYEV, ALLA
Address: 20533 BISCAYNE BLVD STE 117
City-St-Zip: AVENTURA, FL 33180 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SHIRLEY, MONTEYRO
Address: 610 N UNIVERSITY AND PINES BLVD.
City-St-Zip: PEMSROKE PINES, FL 33024

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: ANAIDA RAFAILYAN

P

02/27/2008

Electronic Signature of Signing Officer or Director

Date