


2008 FOR PROFIT CORPORATION ANNUAL REPORT

37.

FILED
May 06, 2008 8:00 am
Secretary of State

03-26-2008 90019 009 ***150.00

DOCUMENT # P07000036745					
1. Entity Name MANDARIN DEVELOPMENT, INC.					
Principal Place of Business 2212 58TH AVENUE EAST BRADENTON, FL 34203			Mailing Address 2212 58TH AVENUE EAST BRADENTON, FL 34203		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KNOWLES, TIMOTHY A 1205 MANATEE AVENUE WEST BRADENTON, FL 34205				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST CARLOS BERUFF 2212 58th AVE EAST BRADENTON FL 34203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>Charles Beruff</u>			2-22-08 941-359-9008		
SIGNATURE AND TYPED OR PRINTED NAME OF BRIDGE OFFICER OR DIRECTOR			Date Daytime Phone #		

66005000



02122008 Chg-P CR2E034 (12/06)

FEI Number **20-8711365** Applied For ☐ Not Applicable ☐