

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

01-11-2008 90070 046 ***150.00

DOCUMENT # P32933

1. Entity Name
MAYRSOHN INTERNATIONAL, INC.



Principal Place of Business
2009 NW 70 AVE
MIAMI, FL 33122 US

Mailing Address
2009 NW 70 AVE
MIAMI, FL 33122 US

66001009



2. Principal Place of Business - No P.O. Box #
2007 NW 70 Ave
Suite, Apt. #, etc.

3. Mailing Address
2007 NW 70 Ave
Suite, Apt. #, etc.

01072008 Chg-P CR2E034 (12/06)

City & State
MIAMI FL
Zip
33122
Country
USA

City & State
MIAMI FL
Zip
33122
Country
USA

4. FEI Number
13-3150879
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MAYRSOHN, MARK
2009 NW 70 AVE
MIAMI, FL 33122

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

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 PD
NAME MAYRSOHN, BERNARD ☐ Delete
STREET ADDRESS 2009 NW 70 AVE
CITY-ST-ZIP MIAMI, FL 33122

TITLE VD
NAME MAYRSOHN, MARK ☐ Delete
STREET ADDRESS 2009 NW 70 AVE
CITY-ST-ZIP MIAMI, FL 33122

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 MAYRSOHN, Bernard
STREET ADDRESS 2007 NW 70 AVE
CITY-ST-ZIP MIAMI FL 33122

TITLE ☒ Change ☐ Addition
NAME MAYRSOHN, MARK
STREET ADDRESS 2007 NW 70 AVE
CITY-ST-ZIP MIAMI FL 33122

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 is 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK MAYRSOHN 2/6/08