2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 07, 2008 08:00 Al Secretary of State DOCUMENT # P93000014168 1. Entity Name MAHALO, INC. Principal Place of Business Mailing Address 5365 WEST RANGER STREET 5365 WEST RANGER STREET BEVERLY HILLS FL 34465-5610 BEVERLY HILLS FL 34465-5610 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 59-3167211 Not Applicable Zιρ Country \$8.75 Additional Country Ζıp 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MASAOY, JANET Street Address (P.O. Box Number is Not Acceptable) 5365 WEST RANGER STREET BEVERLY HILLS FL 34465-5610 City 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 primed leanly of registered electranistics Transplacable. fNOTE. Pagisterad Agentic gnature required when rejectating! DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 ... Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change ☐ Addition TITLE ☐ Derete U00000883619 NAME MASAOY, JOSE NAME 04/17/03-80011-004 150.00 STREET ADDRESS P.O. BOX 162 N/A STREET ADDRESS CRYSTAL RIVER FL 34423-0162 CITY-ST-ZIP CITY - ST- 21P TITLE SD ☐ De₂ete TITLE Change Addition NAME MASAOY, JANET NAME STREET ADDRESS P.O. BOX 162 N/A STREET ADDRESS CRYSTAL RIVER FL 34423-0162 CITY-ST-ZIP CITY-ST-7IF TITLE ☐ Derete THEE ☐ Change Addition 11575 MAGAGY JANET ing to Sept. STREET ADDRESS STREET ADDRESS P.O. BOX 162 N/A CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL 34423-0162 1014.6 ☐ Delete DOL Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deiele TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 offect as it 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 rry name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GNATURE: Day t. Masay (Jane + Masay) April 4, 2008 (352) 527-2577