

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000095478

1. Entity Name

MANDARIN INTERNATIONAL CORPORATION

**FILED**  
**May 31, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90173 049 \*\*\*150.00

Principal Place of Business  
11380 PROSPERITY FARMS ROAD, STE 201  
PALM BEACH GARDENS FL 33410

Mailing Address  
11380 PROSPERITY FARMS ROAD, STE 201  
PALM BEACH GARDENS FL 33410-3477

2. Principal Place of Business  
814 Poplar Drive

3. Mailing Address  
814 Poplar Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Lake Park, Florida

City & State  
Lake Park, Florida

4. FEI Number  
65-0975779

Applied For  
Not Applicable

Zip  
33403

Country  
Palm Beach

Zip  
33403

Country  
Palm Beach

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

## 6. Name and Address of Current Registered Agent

HARRIS, GEORGE E  
11380 PROSPERITY FARMS ROAD, STE 201  
PALM BEACH GARDENS FL 33410

## 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.

SIGNATURE

*Peter Chang*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CHANGE, PETER	
STREET ADDRESS	814 POPLAR DRIVE	
CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Chang, Peter	
STREET ADDRESS	814 Poplar Drive	
CITY-ST-ZIP	Lake Park, FL 33403	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Peter Chang*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-24-00 (561) 386 8714

CR2E034 (3/99)