

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0658474 AT

DOCUMENT # F97000005662

1. Entity Name
MANDARIN ORIENTAL MANAGEMENT (USA) INC.



FILED

03 FEB 14 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
345 CALIFORNIA ST., STE. 1250
SAN FRANCISCO CA 94104
US

Mailing Address
345 CALIFORNIA ST., STE. 1250
SAN FRANCISCO CA 94104
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 94-2972861

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DT
NAME LEE, SHERRY
STREET ADDRESS 345 CALIFORNIA ST., STE. 1250
CITY-ST-ZIP SAN FRANCISCO CA 94104 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
100013267421
02/28/03--01015--026 **150.00

TITLE S
NAME LOKE, KIT CHOY
STREET ADDRESS 101 SECOND ST., STE. 1800
CITY-ST-ZIP SAN FRANCISCO CA 94105 ☐ Delete

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

TITLE DCEO
NAME HULTNER, WOLFGANG K
STREET ADDRESS 345 CALIFORNIA ST., STE. 1250
CITY-ST-ZIP SAN FRANCISCO CA 94104 ☐ Delete

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

TITLE DP
NAME WITT, JOHN R
STREET ADDRESS C/O 281 GLOUCESTER RD., 7TH FL
CITY-ST-ZIP CAUSEWAY BAY, HONG KONG ☐ Delete

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

TITLE D
NAME NGAI, MIRANDA
STREET ADDRESS C/O 281 GLOUCESTER RD., 7TH FL
CITY-ST-ZIP CAUSEWAY BAY, HONG KONG ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Choy Loke, Secretary 2/1/03 (415)369-7110

Date

Daytime Phone #

CR2E034 (10/02)