2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005663

FILED Feb 03, 2009 Secretary of State

Entity Na	me: MANDAF	RIN ORIENTAL MIAMI, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
SUITE 125	ORNIA STRE 50 NCISCO, CA					
Current Mailing Address:			New Maili	New Mailing Address:		
345 CALIF		TAL MANAGEMENT USA, INC ET, SUITE 1250 94104	<u>).</u>			
FEI Number	: 51-0367840	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
1200 SOU PLANTATI The above	PORATION SY TH PINE ISLA ION, FL 3332 named entity e of Florida.	ND ROAD 4 US	ourpose of changing i	ts registered	l office or registered agent, or both,	
SIGNATUI	RE:					
Electronic Signature of Registered Ager			ent	Date		
Election Car	mpaign Financir	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name:	GONZALEZ, J 500 BRICKELI MIAMI, FL 33	. KEY DR. 31) Delete	Title: Name: Address: City-St-Zip: Title: Name:	GONZALEZ, 500 BRICKEI MIAMI, FL 33	LL KEY DR.	
Address: City-St-Zip:		ST., STE. 1800 CO, CA 94105	Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	THOMPSON, \ 345 CALIFORI) Delete 'ALERIE IIA ST STE 1250 CO, CA 94104	Title: Name: Address: City-St-Zip:	THOMPSON, 345 CALIFOR	(X) Change ()Addition VALERIE RNIA ST STE 1250 SCO, CA 94104	
Title: Name: Address: City-St-Zip:	DICKIE, STUA 281 GLOUCES) Delete RT STER RD 7TH FLOOR AY, HK CHINA	Title: Name: Address: City-St-Zip:	(() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALERIE THOMPSON 02/03/2009 D