


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 13, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 834583</b>					
1. Entity Name <b>SOKA GAKKAI INTERNATIONAL - USA, INCORPORATED</b>					
Principal Place of Business <b>606 WILSHIRE BLVD SANTA MONICA CA 90401</b>			Mailing Address <b>20000 SW 36TH STREET FT. LAUDERDALE FL 33332 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>95-2265667</b>	
Zip		Zip		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Country		Country		Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
<b>NAKABAYASHI, FRANK M 1327 SAGE LANE WESTON FL 33327</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b>		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 _____ (NOTE: Registered Agent signature required when reinstating)					
Signature, typed or printed name of registered agent and title if applicable					
DATE					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE	VP	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ODANO, GEORGE			NAME	
STREET ADDRESS	606 WILSHIRE BLVD			STREET ADDRESS	
CITY-ST-ZIP	SANTA MONICA CA 90401			CITY-ST-ZIP	
TITLE	VP	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SASAKI, RICHARD			NAME	
STREET ADDRESS	12030 LAMANDA ST			STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA			CITY-ST-ZIP	
TITLE	VPT	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KATAOKA, GEORGE			NAME	
STREET ADDRESS	23 LAGUNA MADRE			STREET ADDRESS	
CITY-ST-ZIP	ALISO VIEJO CA 92656			CITY-ST-ZIP	
TITLE	VD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCLOSKEY, GUY			NAME	
STREET ADDRESS	1016 WEST MADISON STREET #2N			STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL 60607			CITY-ST-ZIP	
TITLE	VP	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAKABAYASHI, FRANKLIN			NAME	
STREET ADDRESS	1327 SAGO LANE			STREET ADDRESS	
CITY-ST-ZIP	WESTON FL 33327			CITY-ST-ZIP	
TITLE	P	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAGASHIMA, DANIEL			NAME	
STREET ADDRESS	11909 PALMS BLVD			STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90066			CITY-ST-ZIP	



MOORE CR2E037 (11/03)

4. FEI Number **95-2265667** Applied For  Not Applicable

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

<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>NAKABAYASHI, FRANK M 1327 SAGE LANE WESTON FL 33327</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b>	
		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

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

**Make Check Payable to Florida Department of State**

<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
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CITY-ST-ZIP	SANTA MONICA CA 90401			CITY-ST-ZIP	
TITLE	VP	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	CHICAGO IL 60607			CITY-ST-ZIP	
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CITY-ST-ZIP	LOS ANGELES CA 90066			CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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:** *George Kataoka* **GEORGE KATAOKA / VICE PRESIDENT** <sup>2/16/04</sup> (310) 260-8900