## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT #

F98000001886

1. Entity Name

MATSUSHITA ELECTRIC LATIN AMERICA, INC.



**FILED** Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90180 005 \*\*\*150.00

Principal Place 9100 S. DADE MIAMI FL 331.	LAND BLVD		Mailing Address 9100 S. DADELAND BLVD., SUITE 800 MIAMI FL 33156										
2. Principal F	Place of Busin	ess	3. Mailing Address								<b>i P</b> ali <b>i Pa</b> ini i		
Suite, Apt.	#, etc.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & State			City & State					4. FE	I Number 65-	0823493		<u> </u>	plied For
Zip Country			Zip Count			try	5. Certificate			s Desired		\$8.75 Add	litional
6. Name and Address of Current F				Registered Agent			7. Name and Address of New Registered Agent						
						Name							
	PORATION		· · · · · · · · · · · · · · · · · · ·			Street Address (P.O. Box Number is Not Acceptable)							
1200 SOUTH PINE ISLAND ROAD													
PLANTATI	ON FL 3332	24											
	**						City FL Zip					Zip Cod	е
	named entity ions of regist	y submits this statement for ered agent.	the purpo	ose of changing its	registere	ed office o	r registered	d agen	t, or both, in the	State of Florid	da. I am	familiar with,	and accept
SIGNATURE .		or printed name of registered agent a	nd title if soci	cable (NOTE	· Bagislarer	Acent signat	ure required w	hen reine	tating)		DATE		
			Т	Cable. (NOTE	. negisterec	- Agent signat	are required w	nen rems	tading)		DAIE		
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 Ca Trust Fund	ımpaign Finar Contribution.	ncing E		May Be to Fees
10.		OFFICERS AND	DIRECTOR	RS	11.			ADDI	TIONS/CHANG	ES TO OFFIC	ERS AND	DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAO SHIBATA, 9100 S DA MIAMI FL	deland blvd., suite	800	☐ Delete								☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO TOKI, YOS 9100 S DA MIAMI FL	DELAND BLVD., SUITE	800	Delete		ET ADDRESS	9100	s.	i Murak Dadela	nđ Blv	d. S	□ Change uite 8	Addition 300
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete								☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete								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:

22 2003