

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 26, 2002 8:00 am**  
**Secretary of State**

08-26-2002 90051 001 \*\*\*150.00

**DOCUMENT # P01000021330**

1. Entity Name  
**NEKO SUSHI, INC.**

Principal Place of Business

6405 SW 116 PLACE. #A  
 MIAMI FL 33173

Mailing Address

6405 SW 116 PLACE. #A  
 MIAMI FL 33173

**976300**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**PUBLIX (SUSHI BAR)**

Suite, Apt. #, etc.

3. Mailing Address

**8341 WEST FLAGLER ST**

Suite, Apt. #, etc.

City & State

**MIAMI, FLA**

City & State

**MIAMI, FLA**

4. FEI Number

**59-3697315**

Applied For

Not Applicable

Zip **33144**

Country

**DADE**

Zip **33144**

Country

**DADE**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KHIN, MYINT**  
 6405 SW 116 PLACE, #A  
 MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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	PD	<input type="checkbox"/> Delete
NAME	<b>KHIN, MYINT</b>	
STREET ADDRESS	<b>6405 SW 116 PLACE, #A</b>	
CITY-ST-ZIP	<b>MIAMI FL 33173</b>	
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 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
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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: **SIGNATURE REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/23/02 (786) 344-6381  
 Date Daytime Phone #

CR2E034 (4/02)

Attachment

976300

~~# PO 1000021330~~

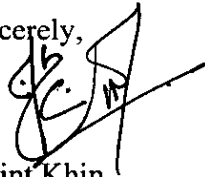
August 23, 2002

To Whom It May Concern:

My name is Myint Khin. I am Sushi Bar owner at location 8341 West Flagler in Miami, FL. I have recently received a letter from (U.B.R.) concerning a late fee for \$400.00. Due to an address change, I was not able to receive the first attempt of my onlisted form on time. My new address is 8842 SW 72<sup>nd</sup> Street, Apartment # J161, Miami, FL 33173. I had called the number provided on the back of the form and spoke with one of the operators and was told to do the following; write a check for the amount of \$150.00 and explain with details on a written letter what had happened. I would really appreciate it if my letter was read and considered, and the amount of \$400.00 for late fees was waved for the fact that I was not aware of this mailed form for the above reason.

If you have any questions, please give me a call me at (305) 277 1197

Sincerely,



Myint Khin