


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2006 8:00 am
Secretary of State

07-24-2006 90003 026 ***158.75

DOCUMENT # P37407

1. Entity Name
CANTEX INC.



Principal Place of Business
2101 SE 1 STR
MINERAL WELLS, TX 76067 US

Mailing Address
PO BOX 340
MINERAL WELLS, TX 76067 US

50022975



2. Principal Place of Business
301 Commerce St
 Suite, Apt. #, etc.
Suite 2700
 City & State
Fort Worth TX
 Zip
76102 Country
USA

3. Mailing Address
301 Commerce St
 Suite, Apt. #, etc.
Suite 2700
 City & State
Fort Worth TX
 Zip
76102 Country
USA

07182006 Chg-P CR2E034 (11/05)

4. FEI Number
13-3645159

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> Delete
NAME	NISHIJO, ATSUSHI	
STREET ADDRESS	600 THIRD AVENUE	
CITY-ST-ZIP	NEW YORK, NY 10016	
TITLE	D	<input type="checkbox"/> Delete
NAME	HORIUCHI, YOSHITO	
STREET ADDRESS	3 CHOME CHIYODA-KU	
CITY-ST-ZIP	TOKYO, JA	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	UNO, HISAYOSHI	
STREET ADDRESS	2101 SE 1ST ST	
CITY-ST-ZIP	MINERAL WELLS, TX 76067	
TITLE	VOT	<input type="checkbox"/> Delete
NAME	CALCOTE, KEVIN	
STREET ADDRESS	2101 SE 1ST STREET	
CITY-ST-ZIP	MINERAL WELLS, TX	
TITLE	P	<input type="checkbox"/> Delete
NAME	WIRTANEN, DON W	
STREET ADDRESS	2102 SE 1ST	
CITY-ST-ZIP	MINERLA WELLS, TX	
TITLE	V	<input type="checkbox"/> Delete
NAME	MERKER, DAVID W	
STREET ADDRESS	2101 SE 1 STR	
CITY-ST-ZIP	MINERAL WELLS, TX	

11. 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
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Kevin Calcote* 7/18/06 817.215.7024
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #