2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 18, 2006
Secretary of State

DOCUMENT# P97000087752

Entity Name: ENKEI FLORIDA, INC.

Current Principal Place of Business:

1401 WHEELS RD
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

1401 WHEELS RD
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 38-3375614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERTS, WARREN
1401 WHEELS RD
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

SUZUKI, HIROFUMI
1401 WHEELS RD
JACKSONVILLE, FL 32218 US

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.

SIGNATURE: HIROFUMI SUZUKI 10/18/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: MCVETY, JONATHAN P
Address: 1401 WHEELS RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD ( ) Delete
Name: KITAGAKI, HIROTOSHI
Address: 2900 W INWOOD DR
City-St-Zip: COLUMBUS, IN 47201

Title: D ( ) Delete
Name: SUZUKI, JUNICHI
Address: ACT TOWER 26F 111-2 ITAYAMACHI
City-St-Zip: HAMAMATSU, SHIZUOKA, JP 430-7726

Title: D ( ) Delete
Name: PEASE, RICHARD
Address: 2900 W INWOOD DR
City-St-Zip: COLUMBUS, IN 47201

Title: D ( ) Delete
Name: MERKEL, RICK
Address: 2900 W INWOOD DR
City-St-Zip: COLUMBUS, IN 47201

Title: D ( ) Delete
Name: UEMURA, YUKIO
Address: 4900 ALLIANCE GATEWAY FREEWAY, STE 100
City-St-Zip: FORT WORTH, TX 76178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: ONOUE, TOKIYASU
Address: 1401 WHEELS RD
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD (X) Change ( ) Addition
Name: NAKABAYASHI, HIDEO
Address: 2900 W INWOOD DR
City-St-Zip: COLUMBUS, IN 47201

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TOKIYASU ONOUE PSD 10/18/2006
Electronic Signature of Signing Officer or Director Date