




FILED
Feb 19, 2008 08:00 AM
Secretary of State

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000040000		
1. Entity Name MITSUWA FLORIDA CORPORATION		
Principal Place of Business 1500 MIAMI CTR.(RJS) 201 SOUTH BISCAYNE BLVD MIAMI, FL 33131		Mailing Address 1500 MIAMI CTR.(RJS) 201 SOUTH BISCAYNE BLVD MIAMI, FL 33131
DO NOT WRITE IN THIS SPACE		
		 01242008 No Chg-P CR2E034 (11/05)
4. FEI Number 20-4591844		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CORPORATION COMPANY OF MIAMI 1500 MIAMI CTR.(RJS) 201 S. BISCAYNE BLVD. MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when resigning)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT TOYOTOSHI, NAOYUKI 1500 MIAMI CTR 201 S.BISCAYNE BLVD MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS TOYOTOSHI, KEIKO 1500 MIAMI CTR 201 S.BISCAYNE BLVD MIAMI, FL 33131	
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DO NOT WRITE IN THIS SPACE		
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Naoyuki Toyotoshi 2-15-08 (305) 379-9146 <small>Date Daytime Phone #</small>