2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V05481

FILED May 21, 2008 Secretary of State

Entity Name: SUSHIN GABLES, INC.	,
Current Principal Place of Business:	New Principal Place of Business:
159 ARAGON AVE CORAL GABLES, FL 33134	
Current Mailing Address:	New Mailing Address:
159 ARAGON AVE #157 CORAL GABLES, FL 33134	159 ARAGON AVE CORAL GABLES, FL 33134
FEI Number: 65-0303821 FEI Number Applied F	For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered A	Agent: Name and Address of New Registered Agent:
ABE, CHIKARA 159 ARAGON AVE CORAL GABLES, FL 33134 US	
The above named entity submits this statement in the State of Florida.	nt for the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Regis	stered Agent Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR

Title: Title: () Delete (X) Change () Addition ABE, CHIKARA ABE, CHIKARA Name: Name: Address: 159 ARAGON AVE Address: 159 ARAGON AVE City-St-Zip: MIAMI, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: VΡ () Change (X) Addition ABE, YASUKO Name: Name:

Address: Address: 159 ARAGON AVE CORAL GABLES, FL 33134 City-St-Zip:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CA DP 05/21/2008