

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 316107

Entity Name: MASON DISTRIBUTORS, INC.**Current Principal Place of Business:**15750 NW 59TH AVENUE
MIAMI LAKES, FL 33014**Current Mailing Address:**15750 NW 59TH AVENUE
MIAMI LAKES, FL 33014**FEI Number:** 59-1260850**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CD
Name	HONJO, HACHIRO
Address	15750 NW 59TH AVENUE
City-State-Zip:	MIAMI LAKES FL 33014

Title	D
Name	WATANABE, MINORU
Address	15750 NW 59TH AVENUE
City-State-Zip:	MIAMI LAKES FL 33014

Title	CEOD
Name	HONJO, YOSUKE
Address	15750 NW 59TH AVENUE
City-State-Zip:	MIAMI LAKES FL 33014

Title	PT
Name	HOSHI, KAZUHIRO
Address	15750 NW 59TH AVE
City-State-Zip:	MIAMI LAKES FL 33014

Title	VP
Name	PIGOTT, GARY
Address	15750 NW 59TH AVENUE
City-State-Zip:	MIAMI LAKES FL 33014

Title	VP
Name	GOKARN, VIJAY
Address	15750 NW 59TH AVENUE
City-State-Zip:	MIAMI LAKES FL 33014

I hereby 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 all other like empowered.

SIGNATURE: KAZUHIRO HOSHI**PRESIDENT****04/11/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date