


# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 08, 2001 8:00 am**  
**Secretary of State**

07-18-2001 90013 030 \*\*\*150.00

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CR2E034 (5/01)

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|--|--|--|--|--|---|
| <b>DOCUMENT # 270914</b>   |  |  |  | <b>1. Entity Name</b><br>GENERAL WIG MANUFACTURERS, INC.   |   |
| <b>Principal Place of Business</b><br>14110 NW 57 CT<br>MIAMI LAKES FL 33014   |  | <b>Mailing Address</b><br>14110 NW 57 CT<br>MIAMI LAKES FL 33014   |  | <br><br>DO NOT WRITE IN THIS SPACE           |   |
| <b>2. Principal Place of Business</b>  |  | <b>3. Mailing Address</b>  |  |  |   |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.  |  |  |   |
| City & State   |  | City & State   |  |  |   |
| Zip  | Country  | Zip  | Country  | <b>4. FEI Number</b> 59-1008784  | <input type="checkbox"/> Applied For<br><input type="checkbox"/> Not Applicable |
| <b>5. Certificate of Status Desired</b>  |  |  |  | <input type="checkbox"/> \$8.75 Additional Fee Required  |   |
| <b>6. Name and Address of Current Registered Agent</b>   |  |  |  |  |   |
| THE PRENTICE-HALL CORPORATION SYSTEM INC.<br>1201 HAYS STREET<br>SUITE 105<br>TALLAHASSEE FL 32301   |  |  |  |  |   |
| <b>7. Name and Address of New Registered Agent</b>   |  |  |  |  |   |
| Name _____<br>Street Address (P.O. Box Number is Not Acceptable) _____<br>City _____ <b>FL</b> Zip Code _____  |  |  |  |  |   |
| <b>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.</b><br><br>SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>   |  |  |  |  |   |
| <b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b><br>(See criteria on back) <input type="checkbox"/>  |  | <b>FILE NOW!!! FEE IS \$550.00</b><br><b>After September 12, 2001 Fee will be \$750.00</b><br><b>Make Check Payable to Department of State</b> |  | <b>10. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |
| <b>11. OFFICERS AND DIRECTORS</b>  |  |  | <b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>               |  |   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <b>D</b><br><b>TAKAYOSHI, OKAMOTO</b><br><b>12-4 SHINJUKU 2 CHOME</b><br><b>SHINJUKU-KU, JAPAN 160</b>       | <input type="checkbox"/> Delete  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>D</b><br><b>OKAMOTO, TAKAYOSHI</b><br><b>12-4 Shinjuku, 2 Chome</b><br><b>SHINJUKU-KU, JAPAN 160</b>                        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition    |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <b>D</b><br><b>SHIGEMI, KAMIMURA</b><br><b>12-4 SHINGJUKV 2 CHOME</b><br><b>SHIMJUKU-KU, TOKYO JAPAN 160</b> | <input checked="" type="checkbox"/> Delete   | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition               |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <b>D</b><br><b>MASAHARU, NAKAO</b><br><b>12-4 SHINJUKU 2 CHOME</b><br><b>SHINJUKU-KU, TOKYO, JAPAN 160</b>   | <input type="checkbox"/> Delete  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>D</b><br><b>NAKAO, MASAHARU</b><br><b>12-4 Shinjuku, 2 Chome</b><br><b>SHINJUKU-KU, TOKYO, JAPAN 160</b>                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition    |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <b>P</b><br><b>SMILEY, ALAN</b><br><b>14118 NW 59TH CT</b><br><b>MIAMI FL 33014</b>                          | <input type="checkbox"/> Delete  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition               |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   | <b>V</b><br><b>RUBIN, DAVID</b><br><b>14110 NW 57TH CT</b><br><b>MIAMI LAKES FL 33014</b>                    | <input type="checkbox"/> Delete  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition               |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>   |  | <input type="checkbox"/> Delete  | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>Director</b><br><b>Mino, Mamoru</b><br><b>12-4, Shinjuku, 2 Chome</b><br><b>Shinjuku-KU, Tokyo, Japan 160</b>               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition    |
| <b>13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.</b> |  |  |  |  |   |
| <b>SIGNATURE:</b> <i>Signature of David Rubin</i><br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  |  | Date: 7/10/01 (305) 823-0600   |  |   |

Attachment # 270914

11844

FL Dept. of State  
Division of Corporations

July 10, 2001

To whom it may concern,

We never received your original report package for 2001 and only just received the enclosed report form from you last week. Therefore we are filing our report for 2001 with the originally required fee of \$150.00 and ask you to please accept this. Thank you.

Yours truly,

*David Rubin*

David Rubin

VP/Finance and Operations