

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 316107

FILED
Apr 20, 2012
Secretary of State

Entity Name: MASON DISTRIBUTORS, INC.

Current Principal Place of Business:

15750 NW 59TH AVENUE
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

15750 NW 59TH AVENUE
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 59-1260850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: VP
Name: GOKARN, VIJAY
Address: 15750 NW 59TH AVENUE
City-St-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

PT

04/20/2012

Electronic Signature of Signing Officer or Director

_____ Date