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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 663569

1. Corporation Name

JAPANESE MARKET, INC.

Mailing Address Principal Place of Business 10431 SW 128 ST 10431 SW 128 ST MIAMI FL 33176 MIAM! FL 33176 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/08/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 59-1963609 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip This corporation owes the current year Intangible □No 30 25 29 Personal Property Tax. 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CHIKARA, ABE Street Address (P.O. Box Number is Not Acceptable) 10431 SW 128 ST **MIAMI FL 33176** 83 84 City 85 Zin Code .11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida: Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating);. Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE TITLE ABE, YASUKO 1.2 NAME NAME 10431 SW 128 ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE Change TITLE 2.1 TITLE ABE, CHIKARA 2.2 NAME NAME 10431 SW 128 ST 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ DELETE 3.1 TITLE ☐ Change 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change □ DELETE ☐ Addition TITLE 5.1 TITLE 5.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplignental enfual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or off an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

SIGNATURE:

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

CITY-ST-ZIP

□ DELETE

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90055 017 ***150.00

Change

☐ Addition

CR2E034 (11/98)