

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-12-2004 90028 044 ****66.25

DOCUMENT # 737899

1. Entity Name

THE JAPAN-AMERICA SOCIETY OF SOUTH FLORIDA,
INC.



Principal Place of Business

4000 MORIKAMI PARK ROAD
DELRAY BCH FL 33446-2305

Mailing Address

4000 MORIKAMI PARK ROAD
DELRAY BCH FL 33446-2305

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

ZWICK, EDWARD F.
5355 TOWN CENTER ROAD STE 801
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

4. FEI Number

59-1720445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

MOORE

CR2E037 (11/03)

66430528



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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]
JAMES MIHORI, PRES

Signature, typed or printed name of registered agent and not applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

07-07-04

FILE NOW: FEE IS \$61.25
Due By: May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIHORI, JAMES 4000 MORIKAMI PARK ROAD DELRAY BEACH FL 33446-2305	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRIFFITH, WARLAND 4000 MORIKAMI PARK ROAD DELRAY BEACH FL 33446	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHAH, B 4000 MORIKAMI PARK ROAD DELRAY BEACH FL 33446	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MIHORI, CHIEKO 4000 MORIKAMI PARK ROAD DELRAY BEACH FL 33446	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LENTSCH, LORRAINE 4000 MORIKAMI PARK RD DELRAY BEACH FL 33446	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAHAM, KAZUKO 4000 MORIKAMI PARK RD DELRAY BEACH FL 33446	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07-26-04 (561)278-3614



Ala chnua

The JAPAN-AMERICA SOCIETY
of South Florida, Inc.

66430528

732899

4000 Morikami Park Road
Delray Beach, FL 33446

JULY 21, 2004

SECRETARY OF THE STATE OF FLORIDA
TALLAHASSEE, FLA

SUBJECT: RE-FILING OF REPORT

MY SINCERE APOLOGY FOR FILING IM-COMPLETE FILING OF OUR
ANNUAL REPORT. HEREWITH, I MADE CORRECTION AND LIKE TO
RE-SUBMIT THE SAME TO YOUR OFFICE.

SINCERELY YOURS

JAMES MIHORI, PRES
JAPAN AMERICA SOCIETY

(TEL) 561-278-3614

[FAX] 561-278-1773

南
ア
リ
カ
日
本
協
会



Attachment
The JAPAN-AMERICA SOCIETY
of South Florida, Inc.

664305287
#737899

4000 Morikami Park Road
Delray Beach, FL 33446

JULY 07, 2004

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLA

DEAR SIR:

RECEIVED ENCLOSED NOTICE (NOTICE OF INTENT TO DISSOLVE)
AND REALIZED MY OVER-LOOK OF ANNUAL PAYMENT FOR OUR SOCIETY.
HEREWITH, WITH MY SINCERE APOLOGY, WE ARE SUBMITTING DELAYED
ANNUAL FEE PAYMENT.

SINCERELY YOURS

JAMES MIHORI, PRES
JAPAN AMERICA SOCIETY
OF SOUTH FLORIDA

(TEL) 561-278-3614
[FAX] 561-278-1773

南
ア
リ
カ
日
本
協
会