2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 740113

1. Entity Name
THE MORIKAMI, INC.

Principal Place of Business	Mailing Address
4000 MORIKAMI PARK ROAD DELRAY BEACH, FL 33446	4000 MORIKAMI PARK ROAD DELRAY BEACH, FL 33446

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03312006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-1767023
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEMAY, BONNIE W
4000 MORIKAMI PARK RD
DELRAY BEACH, FL 33446

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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: Bonnie W Lemay 4/6/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Bonnie W. Lemay

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	GEORGE, STEVEN
STREET ADDRESS	2220 SOUTH OCEAN BLVD, #904
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	PD
NAME	YOSHINO, DONALD
STREET ADDRESS	6681 NW 23RD WAY
CITY-ST-ZIP	BOCA RATON, FL 33496
TITLE	VPD
NAME	SCHMIDT, DAVID W
STREET ADDRESS	2116 NORTHRIDGE ROAD
CITY-ST-ZIP	DELRAY BEACH, FL 33444
TITLE	VPD
NAME	MIHORI, JAMES
STREET ADDRESS	P.O. BOX 34
CITY-ST-ZIP	DELRAY BEACH, FL 33447
TITLE	S
NAME	YAMAKOSHI, BRIAN
STREET ADDRESS	111 BRINY AVENUE #2202
CITY-ST-ZIP	POMPANO BEACH, FL 33062
TITLE	VPD
NAME	FULTON, MAURICE
STREET ADDRESS	1800 S. OCEAN BLVD. #4F
CITY-ST-ZIP	BOCA RATON, FL 33432

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04/29/06-80209-013 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Bonnie W Lemay 4/6/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Bonnie W. Lemay