2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 740113

I FILED
Aug 06, 2009
Secretary of State

Entity Name: THE MORIKAMI, INC.

Current Principal Place of Business:

4000 MORIKAMI PARK ROAD
DELRAY BEACH, FL 33446

BELIVIT BEXELL, LE GOTTO

New Mailing Address:

4000 MORIKAMI PARK ROAD DELRAY BEACH, FL 33446

Current Mailing Address:

FEI Number: 59-1767023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEMAY, BONNIE W VINCENT, MARK A C
4000 MORIKAMI PARK RD
DELRAY BEACH, FL 33446 US VINCENT, MARK A C
4000 MORIKAMI PARK RD
DELRAY BEACH, FL 33446 US

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: MARK ADAM VINCENT 08/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete BAKER, RANDAL Name: Name: 8925 SANDY CREST LANE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: SCHMIDT, DAVID Name: Address: 2116 NORTHRIDGE ROAD Address: City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: Title: VPD () Delete Title: () Change () Addition STREIT, THOMAS Name: Name: 10346 TRAILWOOD CIRCLE Address: Address: City-St-Zip: JUPITER, FL 33478 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: MIHORI, JAMES Name: Address: P.O. BOX 34 Address: City-St-Zip: DELRAY BEACH, FL 33447 City-St-Zip: Title: Title: () Delete () Change () Addition MORRIS, KEN Name: Name:

 Name:
 MORRIS, KEN
 Name:

 Address:
 2531 JARDIN TERRACE
 Address:

 City-St-Zip:
 WESTIN, FL 33327
 City-St-Zip:

Title: VPD () Delete Title: AD (X) Change () Addition

 Name:
 FULTON, MAÜRICE
 Name:
 LEMAY, BONNIE WADM.

 Address:
 1800 S. OCEAN BLVD. #4F
 Address:
 1782 GRANTHAM DRIVE

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BONNIE WHITE LEMAY AD 08/06/2009