

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0011305

DOCUMENT # 740113

1. Entity Name  
THE MORIKAMI, INC.



FILED

03 SEP 29 PM 4:17

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

Mailing Address  
4000 MORIKAMI PARK ROAD  
DELRAY BEACH FL 33446

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

7. Name and Address of New Registered Agent

ROSENSWEIG, LARRY  
4000 MORIKAMI PARK RD  
DELRAY BEACH FL 33446

Name

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

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
After September 10, 2003, min will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete  
NAME KIMMEL, MARVIN P  
STREET ADDRESS 2485 N.W. 46TH ST  
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ Change ☒ Addition  
NAME Treasurer  
NAME Christie, Robert  
STREET ADDRESS 3615 SW 24 Lane  
CITY-ST-ZIP Delray Beach, FL 33445

TITLE PD ☐ Delete  
NAME KOHNKEN, DONALD  
STREET ADDRESS 1799 SABAL PALM DR  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ Change ☐ Addition  
NAME 400023414654  
STREET ADDRESS 09/29/03--01131--001  
CITY-ST-ZIP \*\*245.00

TITLE VPD ☐ Delete  
NAME MIHORI, JAMES S  
STREET ADDRESS P.O. BOX 34 N/A/  
CITY-ST-ZIP DELRAY BEACH FL 33447

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☒ Delete  
NAME BRANDT, HAROLD A  
STREET ADDRESS 6070 GREENSPOINTE DR  
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE VPD ☐ Change ☒ Addition  
NAME Yoshino, Donald T.  
STREET ADDRESS 6468 East Rogers Circle  
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE D ☐ Delete  
NAME BAKER, RANDAL  
STREET ADDRESS 1100 SOUTH OCEAN BLVD #E4  
CITY-ST-ZIP POMPANO BEACH FL 33062

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME FULTON, MAURICE  
STREET ADDRESS 1800 S. OCEAN BLVD. #4F  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 REQUIRED

Donald Kohnken

9/25/03

33432

CR2E037 (4/03)