2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000068

Entity Name: NOBU SOUTH BEACH CORP.

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1901 COLL MIAMI BEA	INS AVE. ACH, FL 3313	9			
Current Mailing Address:			New Mailing Addre	ss:	
1901 COLL MIAMI BEA	INS AVE. ACH, FL 3313	9			
FEI Number:	13-3982714	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
1901 COLL	TIMOTHY LINS AVE 33139 US				
	named entity of Florida.	submits this statement for the pu	ırpose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Ager	nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP (TEPER, MEIR 1901 COLLINS MIAMI BEACH,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (MATSUHISA, N 1901 COLLINS MIAMI BEACH,	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (DE NIRO, ROB 1901 COLLINS MIAMI BEACH,	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (NOTAR, RICHA 1901 COLLINS MIAMI BEACH,	RD AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (YOHALEM, IRA 1901 COLLINS MIAMI BEACH,	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MEIR TEPER DP 04/18/2007