2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2009
Secretary of State

DOCUMENT# F01000000068

Entity Name: NOBU SOUTH BEACH CORP.

Current Principal Place of Business:

1901 COLLINS AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1901 COLLINS AVE.
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 13-3982714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARROW, TIMOTHY
1901 COLLINS AVE
MIAMI, FL 33139 US

Name and Address of New Registered Agent:

REYES, MICHAEL
1901 COLLINS AVE
MIAMI, FL 33139 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: MICHAEL REYES 06/22/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: TEPER, MEIR
Address: 1901 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: MATSUHISA, NOBUYUKI
Address: 1901 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: DE NIRO, ROBERT
Address: 1901 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: S ( ) Delete
Name: NOTAR, RICHARD
Address: 1901 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: T ( ) Delete
Name: YOHALEM, IRA
Address: 1901 COLLINS AVE.
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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 06/22/2009
Electronic Signature of Signing Officer or Director Date