## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## Apr 03, 2003 8:00 am Secretary of State F01000003552 DOCUMENT # 04-03-2003 90138 002 \*\*\*150.00 1. Entity Name GARMI. INC. Principal Place of Business Mailing Address 49 E. FOURTH ST. 49 E. FOURTH ST. 5TH FLOOR SOUTH 5TH FLOOR SOUTH CINCINNATI OH 45202 CINCINNATI OH 45202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 31-0987905 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE □ Delete TITLE Change ☐ Addition NAME HITCH, ROBERT L NAME 580 WALNUT STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CINCINNATI OH 45202 CITY-ST-ZIP TITLE VSD ☐ Delete TITLE Change ☐ Addition NAME ata, masato NAME STREET ADDRESS STREET ADDRESS 33 WHITEHALL STREET CITY-ST-ZIP NEW YORK NY 10004 CITY-ST-ZIP TITLE ☐ Delete TITLE VTD M Change ☐ Addition מדע Saito, Hisatoshi NAME SAITO, HISATOSHI NAME STREET ADDRESS 33 WHITEHALL STREET STREET ADDRESS 15 Independence Blud. CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10004 Warner, NJ 07059 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME DOME, LEONARD S ESQ. NAME STREET ADDRESS ONE BATTERY PARK PLAZA STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10004** TITLE Delete TITLE ☐ Change Addition NAME TOMEDA, AKIRA NAME Yoshida, Koji STREET ADDRESS 33 WHITEHALL STREET STREET ADDRESS 33 Whitehall St. CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10004** New York, NY 10004 TITLE TITLE. ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 607, 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.

CITY-ST-ZIP

CITY-ST-ZIP

HAZEQUIRED Robert L. Hitch

March 27,2003

CR2E034 (10/02)