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DOCUMENT

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

F02000002187

1. Entity Name

FAMILY INADA INC.



Principal Place of Business Mailing Address 10 EAST 40TH STREET, SUITE 3301 10 EAST 40TH STREET, SUITE 3301 NEW YORK NY 10016 NEW YORK NY 10016 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 13-4178003 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UCC FILING & SEARCH SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVE. TALLAHASSEE FL 32301 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. C7DTITLE ☐ Delete TITLE ☐ Addition PCD INADA, NICHIMU NAME NAME INADA, NICHIMU STREET ADDRESS 1-17-26 HIGASHINAKAJIMA,HIGASHIYODOGAWA-KU STREET ADDRESS L-17-26 HIGASHINAKAJIMA, HIGASHIYODOGAWA-KÜ CITY-ST-ZIP CITY-ST-ZIP OSAKA 533-0033 JAPAN DSAKA 533-0033 JAPAN TITLE ☐ Delete Change · Addition TITLE TAKI, CHIKAYO NAME NAME TAKI, CHIKAYO STREET ADDRESS STREET ADDRESS 0 40TH STREET, SUITE 3301 10 40TH STREET, SUITE 3301 CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10016 NEW_YORK, NY 10016 TITLE ☐ Delete 🔀 Change ☐ Addition TITLE S NAME 'ANO,-K-IMIKO--YANO#Kimikoo# STREET ADDRESS STREET ADDRESS 0 40TH STREET, SUITE 3301 10 40TH STREET, SUITE 3301 CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10016 <u>NEW YORK, NY 10016</u> ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME DKA, SHINGO STREET ADDRESS STREET ADDRESS 1-17-26 HIGASHINAKAJIMA, HIGASHIYODOGAWA-K∜ CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME

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 ether like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OF

Chikayo Taki 4/18/03

Date

212-725-8588

Daytime Phone #