

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90031 029 ***150.00

0062680
AV

DOCUMENT # F02949

1. Entity Name

NIPPON AMERICA INCORPORATED

Principal Place of Business

**1195 NW 97TH AVENUE
MIAMI FL 33172**

Mailing Address

**1195 NW 97TH AVENUE
MIAMI FL 33172**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2110335

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**BREIER, ROBERT G.
1320 S. DIXIE HWY., SUITE 830
CORAL GABLES FL 33146**

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **MARTINEZ, DELIA E.**
CITY-ST-ZIP **1195 N.W. 97TH AVE.
MIAMI FL 33172**

TITLE ☐ Delete
NAME **ST**
STREET ADDRESS **CARRERAS, MARIA D.**
CITY-ST-ZIP **1195 NW 97TH AVE.
MIAMI FL 33172**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **PALENZUELA, GONZALO J.**
CITY-ST-ZIP **1195 NW 97TH AVE.
MIAMI FL 33172**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS
CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

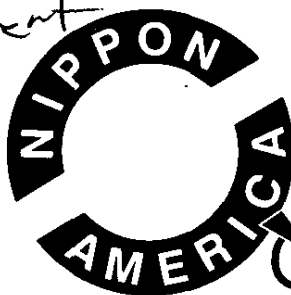
Daytime Phone #

8/15/01

305-592-2616

CR2E034 (5/01)

1195 NW 97th Avenue
Miami, FL 33172
Toll free: 800/327-7522
Tel: 305/592-2616
Fax: 305/591-0039
305/592-3319
E-mail: NipponAm@Worldnet.att.net



A0082602
In.# F02949
OKURA USA, INC.

FAX No PAGES: _____
MESSAGE

TO: Division of Corporations DATE: 8/15/01

ATTN: _____ FROM: _____

REFERENCE: 2001 Uniform Business Report. FEI- 59-2110335

This letter is to inform you, that we
never received the first Invoice for \$150.00.

Please Adjust your Records.

Thank you, very much.

Delia E. Martinez.
President.