

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90355 003 ***150.00

DOCUMENT # F04000001050

1. Entity Name
ADERANS, INC.



Principal Place of Business
**15551 CABRITO ROAD
VAN NUYS, CA 91406**

Mailing Address
**1450 SW THIRD STREET, SUITE A-9
POMPANO BEACH, FL 33069**

40073474



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04052006

Chg-P

CR2E034 (11/05)

4. FEI Number

95-4869197

Applied for

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HIRAMA, KOICHI
C/O GENERAL WIG MANUFACTURERS, INC.
5800 NW 163RD ST
MIAMI LAKES, FL 33014**

Name

OKyo Sthair

Street Address (P.O. Box Number is Not Acceptable)

40 New Concepts Hair Goods, Inc.

1450 SW Third Street, Suite A-9

City

Pompano Beach, FL

FL

Zip Code

33069

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]

4/6/06

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

(Date)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D MINO, MAMORU**
STREET ADDRESS **5-1-2-305 HAKUSAN ASO-KU, KAWASAKI-SHI**
CITY-ST-ZIP **TOKYO JAPAN 215-0014**

TITLE ☐ Delete
NAME **CPST OKAMOTO, TAKAYOSHI**
STREET ADDRESS **7-17-24 TAMAGAWA CHYOFU-SHI**
CITY-ST-ZIP **TOKYO JAPAN 182-0025**

TITLE ☐ Delete
NAME **TOKUMARU, KATSUJI**
STREET ADDRESS **1-6-3 SHINJUKU SHINJUKU-KU**
CITY-ST-ZIP **TOKYO JAPAN**

TITLE ☐ Delete
NAME **KANEKO, NOBORU**
STREET ADDRESS **1001, 1488-1 HACHIMAN-CHO KAMIMARUKU**
CITY-ST-ZIP **NAKAHARA, KAWASAKI-SHI, JAPAN**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '1

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2-18-23 SHIMCAD, ASO-KU, KAWASAKI-SHI**
CITY-ST-ZIP **KANAGAWA JAPAN 215-0022**

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2-6-605 MINAMIMACHI, TODA-SHI**
CITY-ST-ZIP **SAITAMA JAPAN 335-0025**

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

12. I hereby certify that the information supplied within this filing does not qualify for the exemptions contained in Chapter 110, 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 duly empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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