

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F08000004410

**FILED**  
**Jul 14, 2009**  
**Secretary of State****Entity Name:** FUTURE GRAPHICS IMAGING CORPORATION**Current Principal Place of Business:**1175 AVIATION PLACE  
SAN FERNANDO, CA 91340 US**New Principal Place of Business:****Current Mailing Address:**C/O MCUSA, INC.  
1 N LEXINGTON AVE  
W. PLAINS, NY 10601 US**New Mailing Address:****FEI Number:** 26-2876851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** C ( ) Delete  
**Name:** YASUO  
**Address:** 401 VOLVO PARKWAY  
**City-St-Zip:** CHESAPEAKE, VA 10601 US**Title:** P ( ) Delete  
**Name:** YOSHINOBU  
**Address:** 401 VOLVO PKWY CHESAPEAKE VA 23320  
**City-St-Zip:** CHESAPEAKE, VA 10601 US**Title:** S ( ) Delete  
**Name:** DONNA  
**Address:** 1 N LEXINGTON AVE W PLAINS NY 10601  
**City-St-Zip:** WHITE PLAINS, NY 10601 US**Title:** T ( ) Delete  
**Name:** KOHEI  
**Address:** 1 N LEXINGTON AVE  
**City-St-Zip:** WHITE PLAINS, NY 10601 US**Title:** D ( ) Delete  
**Name:** SEMBA, YASUO  
**Address:** 401 VOLVO PARKWAY  
**City-St-Zip:** CHESAPEAKE, VA 10601 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** C (X) Change ( ) Addition  
**Name:** SEMBA, YASUO  
**Address:** 401 VOLVO PARKWAY  
**City-St-Zip:** CHESAPEAKE, VA 10601 US**Title:** P (X) Change ( ) Addition  
**Name:** IKEDA, YOSHINOBU  
**Address:** 401 VOLVO PKWY CHESAPEAKE VA 23320  
**City-St-Zip:** CHESAPEAKE, VA 10601 US**Title:** S (X) Change ( ) Addition  
**Name:** COSTA, DONNA  
**Address:** 1 N LEXINGTON AVE W PLAINS NY 10601  
**City-St-Zip:** WHITE PLAINS, NY 10601 US**Title:** T (X) Change ( ) Addition  
**Name:** ICHIYA, KOHEI  
**Address:** 1 N LEXINGTON AVE  
**City-St-Zip:** WHITE PLAINS, NY 10601 US**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: DONNA COSTA

S

07/14/2009

Electronic Signature of Signing Officer or Director

Date