2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 29, 2007 08:00 AM - Secretary of State

305-382-1700 Daytime Phone #

DOCUI 1. Entity Name FUJIYA, I					Secretary of State
Principal Place 13750 SW 88 MIAMI, FL 33	8TH ST.	Mailing Address 24450 S.W. 187 AVE. HOMESTEAD, FL 33031 U	 S	E IMMITURE TO	
DO NOT WRITE IN THIS SPACE			CE	01152007 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For Not Applicable 59-2144877 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required	
LIVELY, CHIKA 24450 S.W. 187 AVENUE HOMESTEAD, FL 33031			DO NOT WRITE IN THIS SPACE		
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. It 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 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				.00 May Be led to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF PST LIVELY, CHIKA 24450 S.W. 187 AVENUE HOMESTEAD, FL 33031	ECTORS			U00000608838 02/01/07-80026-008 150.00
NTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VP LIVELY, EDGAR 24450 S.W. 187 AVENUE HOMESTEAD, FL 33031				•
NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					10 Florida Statuton I further contilu that the information

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607. SIGNATURE: EDEAR LIVELY