2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# F93000003764

Entity Name: H.I.S. INTERNATIONAL TOURS (NY) INC.

Current Principal Place of Business:

489 FIFTH AVENUE
20TH FLOOR
NEW YORK, NY 10017 US

New Principal Place of Business:

Current Mailing Address:

489 FIFTH AVENUE
20TH FLOOR
NEW YORK, NY 10017 US

New Mailing Address:

FEI Number: 13-3452641 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EBIHARA, CHIKAO
5697 PARKVIEW LAKE DR.
ORLANDO, FL 32821 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SUZUKI, YOSHIO
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: SD ( ) Delete
Name: NAMEKATA, KAZUMASA
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: CD ( ) Delete
Name: SAWADA, HIDEO
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: TREA (X) Delete
Name: HINE, KATSUMI
Address: 489 FIFTH AVE 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KITAYA, MASUAKI
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: D (X) Change ( ) Addition
Name: SAWADA, HIDEO
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: SECR (X) Change ( ) Addition
Name: HINE, KATSUMI
Address: 489 FIFTH AVENUE, 20TH FLOOR
City-St-Zip: NEW YORK, NY 10017

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: KATSUMI HINE SECR 03/26/2009

Electronic Signature of Signing Officer or Director Date