2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005748

Entity Name: I-LOGISTICS (USA) CORP.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1830 205TH ST TORRANCE, CA 90501 US **Current Mailing Address: New Mailing Address:** 1830 205TH ST TORRANCE, CA 90501 US FEI Number: 13-2900579 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition UMEHARA, AKIRA OTA, MASAHIDE Name: Name: 1830 205TH ST 1830 205TH ST Address: Address: City-St-Zip: TORRANCE, CA 90501 US City-St-Zip: TORRANCE, CA 90501 US Title: Title: () Delete () Change () Addition Name: ISHII. KATSUHIKO Name: 1830 205TH ST Address: Address: TORRANCE, CA 90501 US City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition UMEHARA, AKIRA OTA, MASAHIDE Name: Name: 1830 205TH ST 1830 205TH ST Address: Address: City-St-Zip: TORRANCE, CA 90501 US City-St-Zip: TORRANCE, CA 90501 US Title: () Delete Title: () Change () Addition WATANABE, AKIRA Name: Name: Address: 1830 205TH ST Address: City-St-Zip: TORRANCE, CA 90501 US City-St-Zip: Title: Title: () Delete () Change () Addition TOMOSHIGE, TAKUMI Name: Name: 1830 205TH ST Address: Address: TORRANCE, CA 90501 US City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition OTA, MASAHIDE Name: Name: SUNAGA, HIROYUKI Address: 1830 205TH ST Address: 1830 205TH ST City-St-Zip: TORRANCE, CA 90501 City-St-Zip: TORRANCE, CA 90501

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: KATSUHIKO ISHII ST 04/30/2009