2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F9400000194

Entity Name: MOMOKAWA SAKE, LTD., INC.

Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: FOREST GROVE, OR 97116 LIS **Current Mailing Address: New Mailing Address:** 820 ELM ST FOREST GROVE, OR 97116 US FEI Number: 93-1075146 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TIMMONS, ROBERT CFO Name: Name: 1335 SW 66TH AVE APT 301 Address: Address: City-St-Zip: PORTLAND, OR 97225 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: FROST, GRIFFITH Name: CHUN, STEVEN 1579 NE 65TH AVE 15575 NW ST ANDREWS DR Address: Address: HILLSBORO, OR 97124 PORTLAND, OR 97229 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition FROST, DAVID G Name: Name: 1191 NF 3RD AVE Address: Address: City-St-Zip: HILLSBOROR, OR 97124 City-St-Zip: Title: () Delete Title: () Change () Addition MILLER, DONALD Name: Name: Address: 574 SE 28TH PLACE Address: City-St-Zip: HILLSBORO, OR 97123 City-St-Zip: Title: Title: () Delete () Change () Addition LAGOOD, JEFFREY Name: Name: 33100 SW LAUREL RD Address: Address: City-St-Zip: HILLSBORO, OR 97123 City-St-Zip: Title: () Delete Title: () Change (X) Addition MAHER, RICHARD Name: Name: Address: Address: 301 DEER PARK RD City-St-Zip: City-St-Zip: ST HELENA, CA 94574

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT TIMMONS CFO 04/25/2002

SHIGEO NISHIIRI, DIRECTOR 1 JUSAN NICHIMACHI HACHINOHE AOMORI, JAPAN

TOHRU MURAI, DIRECTOR 1 JUSAN NICHIMACHI HACHINOHE AOMORI, JAPAN

STEVE BOONE, DIRECTOR 1286 SW PACIFIC AVE FOREST GROVE, OR 97116