

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000194

Entity Name: MOMOKAWA SAKE, LTD., INC.

FILED
Jan 28, 2004
Secretary of State

Current Principal Place of Business:

820 ELM ST
FOREST GROVE, OR 97116 US

New Principal Place of Business:

Current Mailing Address:

820 ELM ST
FOREST GROVE, OR 97116 US

New Mailing Address:

FEI Number: 93-1075146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: HARPER, JIM CFO
Address: 2816 N HALLECK STEET
City-St-Zip: PORTLAND, OR 972176322 US

Title: P () Delete
Name: CHUN, STEVEN
Address: 15575 NW ST ANDREWS DR
City-St-Zip: PORTLAND, OR 97229

Title: D () Delete
Name: FROST, DAVID G
Address: 1191 NE 3RD AVE.
City-St-Zip: HILLSBOROR, OR 97124

Title: D () Delete
Name: MILLER, DONALD
Address: 574 SE 28TH PLACE
City-St-Zip: HILLSBORO, OR 97123

Title: D () Delete
Name: LAGOOD, JEFFREY
Address: 33100 SW LAUREL RD
City-St-Zip: HILLSBORO, OR 97123

Title: D (X) Delete
Name: MAHER, RICHARD
Address: 301 DEER PARK RD
City-St-Zip: ST HELENA, CA 94574

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO (X) Change () Addition
Name: CHUN, STEVEN CEO
Address: 15575 NW ST ANDREWS DR
City-St-Zip: PORTLAND, OR 97229

Title: SEC (X) Change () Addition
Name: BOONE, STEVEN C SEC
Address: 1286 PACIFIC AVENUE
City-St-Zip: FOREST GROVE, OR 97116

Title: D (X) Change () Addition
Name: MAHER, DICK CHAIR
Address: 301 DEER PARK ROAD
City-St-Zip: ST HELENA, CA 94574

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JIM HARPER

CFO

01/28/2004

Electronic Signature of Signing Officer or Director

Date