


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90102 010 ***150.00

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|--|---|--|--|--|--|
| DOCUMENT # F94000000194 | | | |  | |
| 1. Entity Name MOMOKAWA SAKE, LTD., INC. | | | | | |
| Principal Place of Business 820 ELM ST FOREST GROVE, OR 97116 US | | | Mailing Address 820 ELM ST FOREST GROVE, OR 97116 US | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 01052005 Chg-P CR2E034 (10/03) | |
| 4. FEI Number 93-1075146 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 | | | Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | | |
| 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CFO HARPER, JIM CFO <input checked="" type="checkbox"/> Delete 2816 N HALLECK STEET PORTLAND, OR 972176322 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | (CFO) Controller <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Janice S Hall 820 Elm Street, Forest Gove OR 97116 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D <input checked="" type="checkbox"/> Delete CHUN, STEVEN CEO 15575 NW ST ANDREWS DR PORTLAND, OR 97229 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Kyota Murai, Corp Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 820 Elm Street, Forest Grove OR 97116 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEO <input type="checkbox"/> Delete BOONE, STEVEN CEO 1286 PACIFIC AVENUE FOREST GROVE, OR 97116 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Steve Boone is currently Corporate President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D <input type="checkbox"/> Delete MAHER, DICK-CHAIR 301 DEER PARK ROAD ST HELENA, CA 94574 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Tohru Murai 820 Elm Street Forest Grove, OR 97116 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D <input type="checkbox"/> Delete LAGOOD, JEFFREY 33100 SW LAUREL RD HILLSBORO, OR 97123 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Shigeo Nishiiri 820 Elm Street, Forest Grove OR 97116 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <u>STEVEN C. BOONE</u> Date <u>2/15/05</u> Daytime Phone # <u>503-357-7051</u> | | | | | |

MASTERS OF SAKÉ




**MOMOKAWA
& MOONSTONE**
America's Most Honored Saké

ATTACHMENT

#F94000000194

50025641

MOMOKAWA DIAMOND
MOMOKAWA SILVER
MOMOKAWA RUBY
MOMOKAWA PEARL
MOONSTONE ASIAN PEAR
MOONSTONE RASPBERRY
MOONSTONE PEACH
MOONSTONE PLUM

February 15, 2005

SakéOne Corporate Directors and Officers:

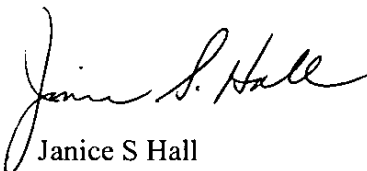
Dick Maher Chairman (Officer)
PO Box 1009, St Helena, CA 94574

Steve Boone President (Officer)
1286 Pacific Avenue, Forest Grove OR 97116

Kyota Murai Secretary (Officer)
Tohru Murai Board Member (Momokawa, Japan)
Shigero Nishiiri Board Member (Momokawa, Japan)
5580 SW 170th Avenue, Beaverton OR 97007

Jeff LaGood Board Member
33100 SW Laurel Road, Hillsboro, OR 97123

Matt Guthrie Board Member
17230 NE Sacramento Street, Portland, OR 97230


Janice S Hall
Corporate Controller