## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F9400000194

Entity Name: MOMOKAWA SAKE, LTD., INC.

FILED Mar 10, 2003 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition TIMMONS, ROBERT CFO Name: Name: HARPER, JIM CFO 1335 SW 66TH AVE APT 301 2816 N HALLECK STEEET Address: Address: City-St-Zip: PORTLAND, OR 97225 City-St-Zip: PORTLAND, OR 972176322 US Title: Title: ( ) Delete () Change () Addition CHUN, STEVEN Name: Name: 15575 NW ST ANDREWS DR Address: Address: PORTLAND, OR 97229 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition FROST, DAVID G FROST, DAVID G Name: Name: 1191 NE 3RD AVE 1191 NE 3RD AVE. Address: Address: City-St-Zip: HILLSBOROR, OR 97124 City-St-Zip: HILLSBOROR, OR 97124 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 () Addition MAHER, RICHARD Name: Name: 301 DEER PARK RD Address: Address: 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: JIM HARPER CFO 03/10/2003

STEVE BOONE DIRECTOR/SECRETARY 1286 PACIFIC AVENUE FOREST GROVE, OR 97116 US