

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000000036 (2)

1. Corporation Name

KABUSIKI KAISHA KIMITSU GOLF CLUB ~~(KATAKANA)~~

Principal Place of Business

3-24-5, NISHI-SHINBASHI  
MINATO-KU, TOKYO JAPAN

Mailing Address

1-5 HON-CHIBA-CHO, CHOU-KU  
CHIBA-SH  
CHIBA  
JP

FILED  
Sep 18 1997 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
01/04/1995

3a. Date of Last Report  
05/23/1996

4. FEI Number

98-0109204

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29 Zip

30 Country

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.  
1201 HAYS ST.  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME KITADA, MASATAKE  
STREET ADDRESS 2-8-27, AZAMINO, MIDORI-KU  
CITY-ST-ZIP YOKOHAMA-SHI, KANAGAWA ☐ DELETE

TITLE VD  
NAME OBATA, KANJI  
STREET ADDRESS 1-8-20-306, HOKUEI  
CITY-ST-ZIP URAYASU-SHI, CHIBA ☐ DELETE

TITLE D  
NAME TAKAHASHI, HARUNORI  
STREET ADDRESS 4-7-1, YAKUMO  
CITY-ST-ZIP MEGURO-KU, TOKYO ☒ DELETE

TITLE D  
NAME TAKAGI, TOMIYASU  
STREET ADDRESS 1-13-12, IKENOUE, USUI-CHO  
CITY-ST-ZIP INBAGUN, CHIBA ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE C  
1.2 NAME KITADA MASATAKE  
1.3 STREET ADDRESS 2-8-27, AZAMINO, Aoba-KU  
1.4 CITY-ST-ZIP YOKOHAMA-SHI, KANAGAWA ☒ Change ☐ Addition

2.1 TITLE PD  
2.2 NAME OBATA KANJI  
2.3 STREET ADDRESS 1-8-20-306 HOKUEI  
2.4 CITY-ST-ZIP URAYASU-SHI, CHIBA ☒ Change ☐ Addition

3.1 TITLE D  
3.2 NAME KASAI HIROKAZU  
3.3 STREET ADDRESS 2-18-16 SHINOHARA KITA, KOUHOKU-KU  
3.4 CITY-ST-ZIP YOKOHAMA-SHI, KANAGAWA. ☐ Change ☒ Addition

4.1 TITLE D  
4.2 NAME TAKAHASHI SHIGERI  
4.3 STREET ADDRESS 4-7-1 YAKUMO  
4.4 CITY-ST-ZIP MEGURO-KU, TOKYO ☐ Change ☒ Addition

5.1 TITLE D  
5.2 NAME TAKEMASU SEISHI  
5.3 STREET ADDRESS 9-26-1 SEISO  
5.4 CITY-ST-ZIP SETAGAYA-KU, TOKYO ☐ Change ☒ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
9000002298949  
-09/22/97--01022--024  
\*\*\*550.00

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

CP2E034 (4/97)