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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT F STATE

Sandra B. Mort

Secretary of Sta DIVISION OF CORPORATIONS

FILED Sep 15 1997 8:00am Secretary of State



Principal Place of Business

Mailing Address

1-14-21, KUDAN-KITA CHIYODA-KU, TOKYO, JAPAN 1-14-21, KUDAN-KITA CHIYODA-KU. TOKYO. JAPAN

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				DO NOT WRITE IN THIS SPACE				
					 Date Incorporated or Qualified 01/04/1995 	3a. Date of Last 05/01/1996	ate of Last Report	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	
21	26			98-0111241 Not A		Not Applicable		
Suite, Apt.	. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	,	Additional Required		
City & Stat	te	City & State		Election Campaign Financing Trust Fund Contribution	9 \$5.00 May Be Added to Fees			
Zip	Country	Zip	Country					
24	25	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
<u></u>	9. Name and Address of Current	1	1201		10. Name and Address of New Ro			
COR	PORATION INFORMATION SERVICE	ES. INC.	81	Name				
1201 HAYS ST.				00 P. H. C.				
TALLAHASSEE FL 32301				Street Add	fress (P.O. Box Number is Not Accepta	DIE)		
******			83					
			84	City		FL 85 Zij	p Code	
office or a agent. I a SIGNATURE	registered agent, or both, in the State of am familiar with, and accept the obligat Signature, typed or printed name of registered agent	ons of, Section 607.0505, FI	lorida Statute	3.	ition's board of directors. I hereby acce	pt the appointment a	is registered	
12.	OFFICERS AND	. 	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	ORS IN 12	
TITLE	PD	DELETE	1.1 TITLE			Change	Addition	
NAME	KAWAGUCHI, SHIGERU		1.2 NAME					
STREET ADDRESS	5-45-11, HONKOMAGOME		1.3 STREET	ADDRESS				
CITY-ST-ZIP	BUNKYO-KU, TOKYO		1.4 CITY - S	11-2119				
TITLE	M	DELETE	2.1 TITLE			☐ Change	Addition	
NAME	INOUE, HARUYO		2.2 NAME					
STREET ADDRESS	3-5-9-202 KOMABA		2 3 STREET	ADDRESS				
CITY-ST-ZIP	MEGURO-KU, TOKYO		2 4 CITY-	S1 - ZIP				
TITLE	D	DELETE	3.1 TITLE		:	Change	Acidition	
NAME	KURANISHI, KATSUO		3.2 NAME					
STREET ADDRESS	SAKAMOTO-CHO, HODOGAYA-K	U	3.3 STREET	ADDRESS				
CITY-ST-ZIP	YOKOHAMA-SHI, KANAGAWA		3.4. CITY-	ST- ZIP				
TITLE	D	DELETE	4.1 TITLE			Change	Addition	
NAME	HIRAO, KIYOSHI		4. 2 NAME					
STREET ADDRESS	1-20-24-301 MIYASAKA		4.3 STREET	ADDRESS				
CITY-ST-ZIP	SETAGAYA-KU, TOKYO		4.4 CITY - S	T-ZIP			$\int \int \int dx$	
TITLE	D	DELETE	5.1 TITLE			Chapp	AdgOor	
NAME	YAMAMOTO, OSAMU		5.2 NAME	İ		7	~ ,, ` `	
STREET ADDRESS	2-19-3 KAMEZAWA		5.3 STREET	ADDRESS			a 1	
CITY-ST-ZIP	SUMIDA-KU, TOKYO		5.4 C/TY-S	T-7/P		·	X	

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 eath; 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

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

61 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

9/2/97

***550.00

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