

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90106 029 ***150.00

DOCUMENT # F95000000108

1. Entity Name

AMERICAN PACIFIC RIM, INC.

Principal Place of Business

Mailing Address

**4732 E. 26TH ST.
 VERNON CA 90040**

**4732 E. 26TH ST.
 VERNON CA 90040**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **95-4092529**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**RUBENSTEIN, IRVING
 1600 N.W. 163RD ST.
 MIAMI FL 33169**

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	IDDA, EISUKE	
STREET ADDRESS	1-16-4 MIDORIGAOKA	
CITY-ST-ZIP	MEGURO-KU, TOKYO JAPAN	
TITLE	VT	<input type="checkbox"/> Delete
NAME	SHUICHI, TERA0	
STREET ADDRESS	7-3-28, MURE, MITAKA	
CITY-ST-ZIP	TOKYO, JAPAN	
TITLE	S	<input type="checkbox"/> Delete
NAME	YAMAZAKI, KAZUhide	
STREET ADDRESS	100 VANDAM ST	
CITY-ST-ZIP	NEW YORK NY 10013	
TITLE	D	<input type="checkbox"/> Delete
NAME	YUZO, KATO	
STREET ADDRESS	3-7-50, HONCHO, TSURUOKA	
CITY-ST-ZIP	YAMAGATA, JAPAN	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IDDA, EISUKE	
STREET ADDRESS	1-16-4, MIDORIGAOKA	
CITY-ST-ZIP	MEGURO-KU, TOKYO, JAPAN	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUICHI TERA0	
STREET ADDRESS	7-3-28, MURE, MITAKA	
CITY-ST-ZIP	TOKYO, JAPAN	
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IDDA, HIROSHI	
STREET ADDRESS	1-16-4, MIDORIGAOKA	
CITY-ST-ZIP	MEGURO-KU, TOKYO, JAPAN	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KAZUhide YAMAZAKI, SECRETARY

Date

323-268-3794

Daytime Phone #

CR2E034 (10/00)