PROFIT CORPORATION ANNUAL REPORT.

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9500003959 1. Corporation Name

NISHIMOTO TRADING CO., LTD.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90103 029 ***150.00



Principal Place	e of Business	Mailing Address							
3941 COMMERCE PARKWAY		3941 COMMERCE PARKWAY							
MIRAMAR FL 3	3025	MIRAMAR FL 33025			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qu	ameu			
					08/16/1995			- Carl Fan	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number		_ 	plied For	
21		26			95-2101387			t Applicable	í
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desi	red	\$8.75	Additional guired [©] चंद्र	1-2-v
.2		27						·	
City & State		City & State			6. Election Campaign Final	ncing 🗆	\$5.00		ı
23		28			Trust Fund Contribution Added to Fees				ı
Zip	Country	Zip Country			8. This corporation owes the current year Intangible				l
24	25	29 30				Personal Property Tax. Yes No 10. Name and Address of New Registered Agent			l
	9. Name and Address of Current	Registered Agent			10. Name and Address of	New Registered A	gent		l
227			8	1 Name					
	O, LEONARD F PA	82 Street Addi			ddress (P.O. Box Number is Not Acceptable)				l
8005 NW 155TH STREET						· ,			l
SUITE B			8:	3	-				
MIAN	/II FL 33016			4 0%			85 Zip (`odo	l
			8	4 City		FL	85 Zip (Joue	Į
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes	, the abo	ve-named co	progration submits this statement f	or the purpose of c	hanging its	registered	l
office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was auth	horized by	y the corpora	ation's board of directors. I hereby	accept the appoint	ment as re	gistered	
SIGNATURE					uired when reinstating)	DATE			۱ ـ
42	Signature, typed or printed name of registered agent OFFICERS AND		egistered Ag	ent signature requ	ADDITIONS/CHANGES		DIRECTO	RS IN 12	(11/98)
12.	PD OFFICERS AND	DELETE	1.1 TITLE		ABBITIONS, OTTANACEO	O OTT TOLITO FINE	☐ Change	Addition	=
TITLE	HASHII, TAKEO		1.2 NAME						
NAME	-							1	F034
STREET ADDRESS				ET ADDRESS					R2F
CITY-ST-ZIP	the state of the s		1.4 C/TY-				☐ Change	Addition	e
TITLE	VD	☐ DELETE	2.1 TITLE				□ Change	[_] Addition	Ī
NAME	NISHIHARA, SEIGO		2.2 NAME						
STREET ADDRESS	2349 W. 229TH ST.		2.3 STRE	ET ADDRESS		_			١
CITY-ST-ZIP	-TORRANCE CA		2.4 CITY	ST-ZIP					=
TITLE	STD	~ DELETE	3.1 TITLE	,	-		☐ Change	Addition	ĺ
NAME	Kanai, Hideo	•	3.2 NAME						
STREET ADDRESS	16625 S. WILTON PLACE		3.3 \$TRE	ET ADDRESS					
CITY-ST-ZIP	TORRANCE CA		3.4. CITY	-ST-ZIP					
TITLE	CD	- DELETE	4.1 TITLE		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		☐ Change	Addition	
NAME	SUSAKI, TATSUZO		4, 2 NAMI	E					
STREET ADDRESS	4466 0185040445 186405 0110			ET ADDRESS					ĺ
	- WOLDS HALL STATE OF THE STATE		4.4 CITY-						l
CITY-ST-ZIP	THOROTHADATO DALAN	☐ DELETE	5.1 TITLE			•	Change	Addition	l
TITLE	·	LJ OLLLIL	5.2 NAME						i
NAME				ET ADDRESS			•		1
STREET ADDRESS									i
CITY-ST-ZIP			5.4 CITY-				П.C	[] A	i
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition	i
NAME			6.2 NAME						i
STREET ADDRESS	•		6.3 STRE	ET ADDRESS					
	·		E OFF.	OT 31D					i

14. 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 annual report of supplier ental 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 eceiver 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, with all other like empowered.

SIGNATURE: