

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G99827

FILED
Oct 16, 2009
Secretary of State**Entity Name:** JAPANESE RESTAURANT "SHIMA," INC.**Current Principal Place of Business:**16873 NW 67TH AVENUE
MIAMI, FL 33015**New Principal Place of Business:****Current Mailing Address:**16873 NW 67TH AVENUE
MIAMI, FL 33015**New Mailing Address:****FEI Number:** 59-2444740**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARISHIMA, TAKEO P
16873 NW 67TH AVENUE
MIAMI, FL 33015 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARISHIMA, TAKEO
Address: 16873 NW 67TH AVENUE
City-St-Zip: MIAMI, FL 33015

Title: S () Delete
Name: FURUYA, TAKAHITO
Address: 10773 NW 58 STREET #135
City-St-Zip: DORAL, FL 33178

Title: S () Delete
Name: ARISHIMA, NORIKO
Address: 921 W 79TH PLACE
City-St-Zip: HIALEAH, FL 33014

Title: D (X) Delete
Name: IWAI, YASUSHI
Address: 8600 SW 107 STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ARISHIMA NORIKO

S

10/16/2009

Electronic Signature of Signing Officer or Director

Date