

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # J14122 (2)

1. Corporation Name

SAGAMI, INC.

Principal Place of Business

% SUSUMU SAITO
3024 N.E. CENTER AVENUE
FORT LAUDERDALE FL 33308

Mailing Address

% SUSUMU SAITO
3024 N.E. CENTER AVENUE
FORT LAUDERDALE FL 33308

FILED

95 JUL -7 AM 9:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/14/1986	3a. Date of Last Report 04/12/1994
4. FEI Number 59-2719809	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	
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

SAITO, SUSUMU
3024 N.E. CENTER AVENUE
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 SAITO, SUSUMU
STREET ADDRESS 3024 N.E. CENTER AVENUE
CITY - ST - ZIP FORT LAUDERDALE FL

TITLE SD
NAME SAITO, HITOMI
STREET ADDRESS 3024 N.E. CENTER AVENUE
CITY - ST - ZIP FORT LAUDERDALE FL

TITLE VP
NAME MITSUO, YOSHIE
STREET ADDRESS 3024 NE CENTER AVENUE
CITY - ST - ZIP FT. LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *Susumu Saito* SUSUMU SAITO 6/28/95 (305) 561-2131
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/95)