FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Mar 05, 1999 8:00 am Secretary of State 03-05-1999 90082 047 ***150.00

1999

DOCUMENT #
1. Corporation Name J14122

SAGAMI, INC.

Ondrivii,						
Principal Place	of Business	Mailing Address) (40)((0 0)44)(4); 4)80) (10)4)(0)4)(0) 0)0)(0)0)
% SUSUMU SA 3024 N.E. CENT	TER AVENUE	% SUSUMU SAITO 3024 N.E. CENTER AVENUE				DO NOT WRITE IN THIS SPACE
FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 3330			<i>,</i> 0	,		3. Date Incorporated or Qualifed
						05/14/1986
2 Principal Pt	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21	ace of Eddinios	26				59-2719809 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			2	5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State	<u> </u>	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip Country			8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
		-		81	Name	•
	O, SUSUMU			82	Street Add	dress (P.O. Box Number is Not Acceptable)
	N.E. CENTER AVENUE	•				
FOR	T LAUDERDALE FL 33308			83		
				84	City	FL 85 Zip Code
office or re agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	itnonzec	י עם נ	tne corpora	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE:	Registered	Agen	t signature requi	red when reinstating) DATE
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TI	.1 TITLE		Change Addition
NAME	SAITO, SUSUMU		1.2 N/	1.2 NAME		
STREET ADDRESS	∞, 00£; 11.2. 0±11.2.1.		1.3 \$1	TREET	ADDRESS	
CITY-ST-ZIP			1.4 CI	TY-ST	Γ- ZIP	
TITLE	SD	DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	SAITO, HITOMI		2.2 NAME			
STREET ADDRESS	COLT TILL CLITCH STREET		2.3 \$1	TREET	ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL		2.4 CITY-S		T-ZIP	
TITLE	VP .	☐ DELETE	3.1 TITLE			Change Addition
NAME	MITSUO, YOSHIUE		32 NAME			
STREET ADDRESS	OUL THE OUTTEN THE TOTAL				ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-1		T-ZIP	Change Addition
TITLE		☐ DELETE	4.1 Tt			
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		[7 ocuere	_	ITY-SI	T-ZIP	Change Addition
TITLE		☐ DELETE	5.1 TI		i	. Change [] Addition (
NAME			5.2 N			·
STREET ADDRESS					TADDRESS	
CITY-ST-ZIP			5.4 C	TY-S	T-ZIP	

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 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, with all other like empowered.

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

DELETE

☐ Change

☐ Addition