


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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**FILED**  
**Jun 14, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90002 014 \*\*\*\*50.00

<b>DOCUMENT # L02000014819</b> 1. Entity Name <b>SEITO SUSHI BALDWIN PARK, LLC</b>					
Principal Place of Business <b>1221 E. ROBINSON ST. ORLANDO, FL 32801</b>			Mailing Address <b>1221 E. ROBINSON ST. ORLANDO, FL 32801</b>		
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 <b>47-0874668</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>FONG, DAVID 1221 E. ROBINSON ST. ORLANDO, FL 32801</b>			Name Street Address (P.O. Box Number is Not Acceptable) City		
			State <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>SEITO GROUP, LLC</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>1221 E. ROBINSON ST ORLANDO, FL 32801</b>		CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
President of JM Partners, Inc, MGRM of Seito Group, LLC					
<b>SIGNATURE: DAVID FONG</b>			Date <b>6/8/04</b>		