2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Jan 17, 2006 08:00 AM Secretary of State **DOCUMENT # L02000031715** Entity Name S.T. JAPAN USA, LLC Mailing Address Principal Place of Business 8813 EAST BAY CIRCLE 8813 EAST BAY CIRCLE FT. MYERS, FL 33908 FT. MYERS, FL 33908 US 01132006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SHAPS, RICHARD H 8813 EAST BAY CIRLCE FT. MYERS, FL 33908 IN THIS SPACE 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 Signature, typed or primed name of registered agent and tale if applicable. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9 MGRM πιε SHAPS, RICHARD H NAME U00000389891 8813 EAST BAY CIRCLE STREET ADDRESS 01/23/06-80003-014 55.00 CITY-ST-ZIP FT. MYERS, FL 33908 mle NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

CITY-ST-ZIP