| CORPORATION<br>ANNUAL REPORT<br>1997   |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS  |  | Apr 08 1997 8:00am<br>Secretary of State   |   |   |
|--|--|---|--|--|---|---|
|  | 14858  | (9)   |  | I KATIVA KATATI KATATI KATATI  | ANALI ALAN ALAN ALAN ALAN   | <b></b>   |
| ncipal Place of Business<br>NW 156TH LANE<br>O NE 182ND ST., #50<br>JBROKE PINES FL 33028  | 321 M<br>50  | ig Address<br>W 156TH LANE<br>ROKE PINES FL 33028   | -1503  |  |   |   |
|  | US   |   | · · ·  | 3. Date Incorporated or Qualified<br>09/12/1989  | 3a. Date of Last R<br>04/23/1996  | leport  |
| Principal Prace of Business  | 28. M  | ailing Address  |  | 4. FEI Number<br>65-0147934  | ┣━╉┉╧   | oplied For<br>ot Applicable                                     |
| Suite, Apt. #, etc.  | Su   | uito, Apt. #, etc.  |  | 5. Certificate of Status Desired   | \$8.75  | Additional  |
| Dity & State   |  | iy & State  |  | 6. Election Campaign Financing   | \$5.00  | aquired<br>May Be   |
| Zip Couri  | ⊢ `  | · –   | Country  | Trust Fund Contribution 8. This corporation has liability for i                          | intangible tax under s  | to Fees<br>199.032,   |
| 9, Name and Add  | 29<br>ress of Current Register   |   | 00   | Florida Statutes   | Yes No  |   |
|  |  |   | 84 City  |  | Fl. 85 Zip  | Code  |
| office or registured agent, or bo<br>agent. I am familiar with, and ac<br>NATURE   | oth, in the State of Florida.<br>Scept the obligations of, Si  | Such change was au<br>ection 607.0505, Flori  | , the above-named cor<br>thorized by the corpora<br>cla Statutes.  | rporation submits this statement for the p<br>ation's board of directors. I hereby accep | FL.  <br>purpose of changing it<br>of the appointment as  | ts registered   |
| office or registured agent, or bo<br>agent I an Tambar with, and ac<br>NATURE<br>Structure track or prived by  | oth, in the State of Florida.  | Such change was au<br>ection 607.0505, Flori<br>aplicable (NOTE-<br>DRS   | s, the above-named col<br>thorized by the corpora<br>da Statutes.<br>Registered Agent signature requ<br>13.  | ation's board of directors. I hereby accep   | DATE  | ts registered<br>registered                                     |
| office or registured agent, or bo<br>agent 1 ani tamihar with, and ac<br>NATURE<br><u>Speaker typed or period to</u>   | oth, in the State of Florida.<br>Scept the obligations of, St<br>ine of registered agent and the if ap<br>OFFICERS AND DIRECTC | Such change was au<br>ection 607.0505, Flori<br>splicable (NOTE   | the above-named control thorized by the corpora<br>da Statutes.  | ation's board of directors. I hereby accep   | PL. Durpose of changing in the appointment as   | ts registered<br>registered                                     |
| office or registured agent, or bo<br>agent 1 and taminar with, and ac<br>NATURE<br>Brooker typed or period to<br>P<br>KAZUAKI, KOJIMA<br>S21 NW 156TH L  | oth, in the State of Florida<br>coopt the obligations of, St<br>of Flores AND DIRECTC<br>A<br>ANE                              | Such change was au<br>ection 607.0505, Flori<br>aplicable (NOTE-<br>DRS   | s, the above-named control thorized by the corpora<br>da Statutes.<br>Registered Agent signature requi<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS   | ation's board of directors. I hereby accep   | DATE  | ts registered<br>registered                                     |
| office or registured agent, or be<br>agent I an Lamibar with, and ac<br>NATURE<br>Streature typint or protection<br>Streature typint or protection<br>(CADDRESS)<br>Streature typint or protection<br>Streature typint or protection<br>(CADDRESS)<br>Streature typint or protection<br>(CADDRESS)<br>Streature typint or protection<br>(CADDRESS)   | oth, in the State of Florida<br>coopt the obligations of, St<br>of Flores AND DIRECTC<br>A<br>ANE                              | Such change was au<br>ection 607.0505, Flori<br>aplicable (NOTE-<br>DRS   | s, the above-named control thorized by the corpora<br>da Statutes.<br>Registered Agent signature required<br>13.<br>1.1 TIFLE<br>1.2 NAME  | ation's board of directors. I hereby accep   | DATE  | ts registered<br>registered                                     |
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