

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # L65281 (2)

1. Corporation Name

MIDO U.S.A., INC.



Principal Place of Business

**25 BELLEVUE BLVD
BELLEAIR FL 34616
US**

Mailing Address

**P. O. BOX 2317
CLEARWATER FL 34617
US**

2. Principal Place of Business

2a. Mailing Address

21 Sub-Apt. #, etc.

26 Sub-Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**JOHNSON, TIMOTHY A JR.
911 CHESTNUT ST.
CLEARWATER FL 34616**

3. Date Incorporated or Qualified

04/13/1990

3a. Date of Last Report

03/14/1995

4. FEI Number

59-3003939

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607 (7)(2) 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 I accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

Signature of person authorized to prepare and file this statement

Signature of Registered Agent or person authorized to change

Date

12. OFFICERS AND DIRECTORS

1. TITLE	D	☐ DELETE
2. NAME	KUROSAWA, MAMORU	
3. STREET ADDRESS	25 BELLEVUE BLVD	
4. CITY, ST, ZIP	BELLEAIR FL	
1. TITLE		☐ DELETE
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
1. TITLE		☐ DELETE
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
1. TITLE		☐ DELETE
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
1. TITLE		☐ DELETE
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent. If the name of the registered agent appears in Block 12 or Block 13 it changed, or on or after the date of filing this report.

SIGNATURE:

Mamoru Kurosawa

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/96

442-6171

CR2E034 (12/95)