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Feb 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L86699

(0)

1. Corporation Name
SUNTACC AND COMPANY, INC.

Principal Place of Business

ULLMAN, SAMUEL C. C/O KELLEY DRYE & WARREN
201 S. BISCAYNE BLVD., STE 2400
MIAMI FL 33131
US

Mailing Address

ULLMAN, SAMUEL C. C/O KELLEY DRYE & WARREN
201 S. BISCAYNE BLVD., STE. 2400
MIAMI FL 33131-2378
US



3. Date Incorporated or Qualified
07/12/1990

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 1 DOUGLAS STREET, SMW

Suite, Apt. #, etc.

22 City & State

23 HOMOSASSA, FLORIDA

Zip

24 32646

Country

25 U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

4. FEI Number

65-0206839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ULLMAN, SAMUEL C.
201 SOUTH BISCAYNE BOULEVARD
SUITE 2400
MIAMI FL 33131

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 607.0502 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of principal officer or registered agent, as applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PDT	☐ DELETE
NAME	INOUE, YUKIHISA	
STREET ADDRESS	18 UMENOKICHO, SHIMOGAMO	
CITY - ST - ZIP	KYOTO, JAPAN	
TITLE	D	☒ DELETE
NAME	INOUE, YUMIKO	
STREET ADDRESS	18 UMENOKICHO, SHIMOGAMO	
CITY - ST - ZIP	KYOTO, JAPAN	
TITLE	VSD	☐ DELETE
NAME	ISHIHARA, KAYOKO	
STREET ADDRESS	3-78 YOBITSUGI-CHO	
CITY - ST - ZIP	AICHI, JAPAN	
TITLE	V	☐ DELETE
NAME	SANDERS, JAMES	
STREET ADDRESS	137 DOUGLASS ST.	
CITY - ST - ZIP	HOMOSASSA FL	
TITLE	V	☐ DELETE
NAME	COOKE, STANLEY	
STREET ADDRESS	5 RYEWOOD CIR.	
CITY - ST - ZIP	HOMOSASSA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	D
2.3 STREET ADDRESS	OGASAWARA, YUMICO
2.4 CITY - ST - ZIP	18 UMENOKICHO, SHIMOGAMO
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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

SIGNATURE *James T. Sanders* JAMES T. SANDERS, SR. V.P. 261/97(352) 382-3838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)