FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 26600

1. Corporation		COMPANY, INC.	9	(0)			A SARAHARI BAY JANAR BIRKA BAHAR KAHAR KAHAR KAHAR KAHAR	(<u> </u>	
Principal Place of Business Mailing Address								'BI'	
'									
1 DOUGLAS ST HOMOSASSA FL 82646				ULLMAN. SAMUEL C. C/O KELLEY DRYE & WARREN 201 S. BISCAYNE BLVD STE. 2400			N		
US				MIAMI FL 33131			DO NOT WRITE IN THIS SPACE		
			US	US			3. Date Incorporated or Qualified		
							07/12/1990		
2. Principal P	Place of Busin	nøss		2a. Mailing Address			4. FEI Number	——————————————————————————————————————	plied For
21			26	Suite, Apt, #, etc.			65-0206839		t Applicable
Suite, Apt.	#, OtC.		ļŋ				5. Certificate of Status Desired	\$8.75 A Fee Re	
22 City & Stat	le .		27 City & St	City & State			• Floation Commission Figure in a		·
23	.0		<u></u>	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip		Country	Zip			γ	8. This corporation owes or has paid the current year intangible		
24	25		29	29 30		•	Personal Property Tax due June 30. 🔼 Yes 🔲 No		
9, Name and Address of Current Registered Agent							10. Name and Address of New Regis		
ULLMAN, SAMUEL C.						Name			
201 SOUTH BISCAYNE BOULEVARD					8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
SUITE 2400					L				
MIAMI FL 33131					83	3			
					84	1 City	***************************************	85 Zip (Code
								FL S Z P	
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 regional of the corporation of the c									s registered registered
SIGNATURE								DATE	
Signature, typed or printed name of registered agent and little if applicable. (NOTE: 12. OFFICERS AND DIRECTORS						geni signatura raqui	red when reinstating) ADDITIONS/CHANGES TO OFFICEF		S IN 12
TITLE	PDT			DELETE	13.	I	ADDITIONO/OFFAITGES TO OFFICE	Change	Addition
NAME		YUKIHISA	_	_	1.2 NAME				
STREET ADDRESS		NOKICHO, SHIMOG	AMO	1.3 ST		T ADDRESS			
CITY-ST-ZIP	куото,					ST-ZIP			
TITLE	D			DELETE 2.1				☐ Change	☐ Addition
NAME	QG ASA\	WARA, YUMICO		2.2 NAME					
STREET ADDRESS	44 114 4014 4014 4014 40 4014 40 4014 40					T ADORESS			
CITY-ST-ZIP KYOTO, JAPAN					2. 4 CITY	-ST-ZIP	_		
TITLE	VSD □ DEL			DELETE	3.1 TITLE			☐ Change	Addition
NAME		ia, kayoko			3.2 NAME				Ì
STREET ADDRESS		BITSUGI-CHO			3.3 STREE	T ADDRESS			
CITY-ST-ZIP	AJCHI, J	APAN			3.4. CITY				
TITLE	V	_		DELET E	4.1 TITLE	ļ		Change	Addition
NAME		RS, JAMES			4. 2 NAM	E			
STREET ADDRESS		UGLASS ST.			4.3 STREE	T ADDRESS			
CITY-ST-ZIP		ASSA FL			4.4 CITY-				
TITLE	V	AT 111 71.	L	DELETE	5.1 TITLE	1		☐ Change	Addition
NAME		STANLEY			5.2 NAME	1			Ţ
STREET ADDRESS		OOD CIR.				T ADDRESS			
CITY-ST-ZIP				I DELETE	5.4 CITY-ST-ZIP			Change	Addition
TITLE			<u> </u>	DELETE	6.1 TITLE			Change	☐ Addition
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREE	T ADDRESS			

14. 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 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 shanged, or on an attackment with an address.