

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91157 025 \*\*\*150.00

05/03/24 AV

**DOCUMENT # L86922**

1. Entity Name  
**WORLD WOODS CORPORATION**



Principal Place of Business  
**1 DOUGLAS ST  
HOMOSASSA FL 34446  
US**

Mailing Address  
**ATTN: CONTROLLER  
P.O. BOX 3809  
HOMOSASSA SPRINGS FL 34447  
US**

**11041324**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

**ATTN: CONTROLLER**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**P.O. BOX 3809**

City & State

City & State

**HOMOSASSA SPRINGS, FL**

4. FEI Number

**65-0206855**

Applied For

Not Applicable

Zip

Country

Zip

Country

**34447**

**U.S.A**

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TANIO, JUN  
ONE DOUGLAS STREET  
HOMOSASSA FL 34446**

Name

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

City

**FL**

Zip Code

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
INOUE, YUKIHISA  
18 UMENOKICHO, SHIMOGAMO  
KYOTO, JAPAN** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
OGASAWARA, YUMICO  
18 UMENOKICHO SHIMOGAMO  
KYOTO, JAPAN** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD  
ISHIHARA, KAYOKO  
3-78 YOBITSUGI-CHO  
AICHI, JAPAN** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
COOKE, STANLEY  
5 RYEWOOD CIR.  
HOMOSASSA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED TANIO**

**4-30-03**

**352-382-3112**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)