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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L94538** (0)

1. Corporation Name

SUNSHINE-7, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PM 2:59

Principal Place of Business

5950 HAZELTINE NATIONAL DR 120
ORLANDO FL 32822

Mailing Address

5950 HAZELTINE NATIONAL DR 120
ORLANDO FL 32822

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/02/1990

3a. Date of Last Report

06/14/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-3026921

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

9. Name and Address of Current Registered Agent

PEARLMAN, CRAIG S.
201 S. ORANGE AVE.
SUITE 900
ORLANDO FL 32802

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME KISTLER, DEBRA C.
STREET ADDRESS 5950 HAZELTINE NATIONAL DR., STE 120
CITY-ST-ZIP ORLANDO FL

TITLE PT
NAME SHIMADA, YUTAKA
STREET ADDRESS 5777 WEST-CENTURY BLVD. STE 550
CITY-ST-ZIP LOS ANGELES CA

NAME WATANABE, KENICHI
STREET ADDRESS 2-7-8 SARUGAKU-CHO
CITY-ST-ZIP TOKYO JAPAN

TITLE D
NAME KAWAZOE, KAZUMI
STREET ADDRESS 2-7-8 SARUGAKU-CHO
CITY-ST-ZIP TOKYO JAPAN

TITLE D
NAME KAWAZOE, FUKUYOSHI
STREET ADDRESS 2255 KUHIO AVE #M-4
CITY-ST-ZIP HONOLULU HI

TITLE D
NAME UEDA, TOSHIO
STREET ADDRESS 1-3-7 TOSABORI NISHI-KU
CITY-ST-ZIP OSAKA, JAPAN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V
1.2 NAME OSHIMA, SHINICHIRO
1.3 STREET ADDRESS 5950 HAZELTINE NAT'L. DR., STE 120
1.4 CITY-ST-ZIP ORLANDO, FL 32822 ☐ Change ☒ Addition

2.1 TITLE V
2.2 NAME OTSUKA, NORIYUKI
2.3 STREET ADDRESS 5950 HAZELTINE NATIONAL DR., STE 120
2.4 CITY-ST-ZIP ORLANDO, FL 32822 ☐ Change ☒ Addition

3.1 TITLE V
3.2 NAME NAKASHIMA, TAKANAO
3.3 STREET ADDRESS 5950 HAZELTINE NATIONAL DR., STE 120
3.4 CITY-ST-ZIP ORLANDO, FL 32822 ☐ Change ☒ Addition

4.1 TITLE D
4.2 NAME KAWAZOE, KAZUMI
4.3 STREET ADDRESS 1-33-18 HAKUSAN BUNKYO-KU, TOKYO JAPAN
4.4 CITY-ST-ZIP 113 ☒ Change ☐ Addition

5.1 TITLE PT
5.2 NAME SHIMADA, YUTAKA
5.3 STREET ADDRESS 1-33-18 HAKUSAN BUNKYO-KU, TOKYO JAPAN
5.4 CITY-ST-ZIP 113 ☒ Change ☐ Addition

6.1 TITLE D
6.2 NAME WATANABE, KENICHI
6.3 STREET ADDRESS 1-33-18 HAKUSAN BUNKYO-KU, TOKYO JAPAN
6.4 CITY-ST-ZIP 113 ☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Debra C. Kistler

DEBRA C. KISTLER

JAN. 16, 1995 (407) 438-0940

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number