2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001737

Address:

City-St-Zip:

1593 ZENITH WAY

WESTON, FL 33327

FILED Apr 24, 2008 Secretary of State

Entity Nar	ne: FUSHU DA	AIKO INC.			
Current Principal Place of Business:			New Principal Place of Business:		
1593 ZENI WESTON,					
Current Mailing Address:			New Mailing Address:		
1593 ZENI WESTON,					
FEI Number:		FEI Number Applied For ()	FEI Number Not Appli	icable (X) Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
MORAES, 1593 ZENI WESTON,		S			
	named entity su of Florida.	bmits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	Signature of Registered Ager	nt	Date	
OFFICERS	S AND DIRECT	ORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D ()E MORAES, FERM 1593 ZENITH WA WESTON, FL 33	Υ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E CANE, CHARLES 14580 NW 6TH C PLANTATION, FL	T .	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C COVIN, KEVIN 1830 NW 26TH A FT LAUDERDALE		Title: Name: Address: City-St-Zip:	D (X) Change () Addition COVIN, KENDALL 1830 NW 26TH AVE FT LAUDERDALE, FL 33311	
Title: Name: Address: City-St-Zip:	D () CARLTON, YOSH 4815 NW 2ND PL PLANTATION, FL	ACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	D () [MATSUDA, HIDE	0elete ≺I	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: FERNANDO L. MORAES **PRES** 04/24/2008