
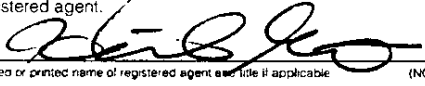
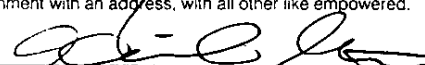


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90189 048 ***150.00

DOCUMENT # P00000059806					
1. Entity Name HIRO'S YAKKO-SAN, INC.					
Principal Place of Business 17040-46 WEST DIXIE HWY MIAMI, FL 33160			Mailing Address 3007 NE 163RD STREET NORTH MIAMI BEACH, FL 33160		
2. Principal Place of Business		3. Mailing Address 17040-46 West Dixie Highway			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State N. Miami Beach, FL		4. FEI Number 65-1018532	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33160		Country Miami-Dade		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SHIGETOMI, HIROSHI 3007 NE 163RD STREET NORTH MIAMI BEACH, FL 33160			Name SHIGETOMI, HIROSHI		
			Street Address (P.O. Box Number is Not Acceptable) 17040-46 West Dixie HWY		
			City N. Miami Beach FL Zip Code 33160		
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		 Hiroshi Shigetomi		2-26-06	
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, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SHIGETOMI, HIROSHI	NAME			
STREET ADDRESS	3007 NE 163RD STREET	STREET ADDRESS	17040-46 West Dixie Highway		
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33160	CITY-ST-ZIP	North Miami Beach, FL 33160		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:		 Hiroshi Shigetomi		2-26-06 (305) 788-7512	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	