2004 FOR PROFIT CORPORATION

May 24, 2004 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P0000066214 05-24-2004 90004 017 ***158.75 1. Entity Name WASABI SUSHI BAR, INC. Principal Place of Business Mailing Address 1549 SUNSET DRIVE 1549 SUNSET DRIVE CORAL GABLES, FL 33143 CORAL GABLES, FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05052004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number 65-1024460 Zip Country Zio Country 5. Certificate of Status Desired -6.-Name and Address of Current Registered Agent Name MCCLENDON, SCOTT

Not Applicable \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent --4415 ANDERSON RD (CORAL GABLES, FL 38146 Street Address (P.O. Box Number is Not Acceptable) Zip Code FL 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. Lam tamiliar with, and accept The obligations of registered agent. . .1 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TIBLE ☐ Change Addition NAME MCCLENDON, SCOTT NAME 4415 ANDERSON RD STREET ADORESS STREET ADDRESS CITY-ST-ZIF MIAMI, FL 33146 CITY-ST-7IP ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADURESS STREET ADDRESS CHY-S1-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not quality 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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:

51077 MC(LENDS - 8-04 305-663-0334)

RDIRECTOR Date Dayline Phone * SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR I

FILED

Applied For

Affachment

M. TACHIBANA, C.P.A., P.A.

MEMBER - AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

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May 7, 2004

Department of State Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302

RE: WASABI SUSHI BAR, INC.
Annual Report 2004

Dear Sir/Madam

Enclosed, please find a check in the amount of \$150 as payment for the 2004 State of Florida Annual Report filing fee. 159.75

My client, WASABI SUSHI BAR, INC., did not receive the renewal notice from the State. They are now submitting their 2004 Annual Report filing upon our reminder to them.

We would greatly appreciate your kind understanding and cooperation in this matter.

Very Truly Yours,

M.-Tachibana, C.P.A-

enc.