

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90354 014 ***150.00

DOCUMENT # P01000027633

1. Entity Name

M.Y. INTERNATIONAL, INC.



Principal Place of Business

3817 NORTH DALE BLVD
TAMPA FL 33624

Mailing Address

3817 NORTH DALE BLVD
TAMPA FL 33624

2. Principal Place of Business

RESTAURANT

3. Mailing Address

3817 NORTHDAL BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

Country

Zip

Country

33624

4. FEI Number

59-6709096

Applied For

Not Applicable

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

YUKIKO, BARNHILL
2013 GREEN JUPITER LANE
BRANDON FL 33511

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, 2004 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 PS ☐ Delete
NAME BARNHILL, YUKIKO
STREET ADDRESS 2013 GREEN JUNIPER LANE
CITY-ST-ZIP BRANDON FL 33511

TITLE D. ☐ Change ☐ Addition
NAME BARNHILL YUKIKO
STREET ADDRESS 2013 GREEN JUNIPER LANE
CITY-ST-ZIP BRANDON FL 33511

TITLE V ☐ Delete
NAME SHIMADA, MACHIKO
STREET ADDRESS 16552 NORTHDAL OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

TITLE D.S. ☐ Change ☐ Addition
NAME SHIMADA MACHIKO
STREET ADDRESS 16552 NORTHDAL OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D.P. ☐ Change ☐ Addition
NAME SHIMADA MINEO
STREET ADDRESS 16552 NORTHDAL OAKS DRIVE
CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

MINEO SHIMADA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/2004
Date

813-962-4005
Daytime Phone #