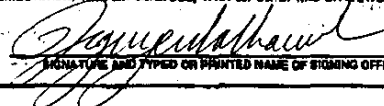


FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90250 003 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P02000010670 1. Entity Name NTT INCORPORATED			
Principal Place of Business 22175 CRESSMONT PL BOCA RATON FL 33428		Mailing Address 22175 CRESSMONT PLACE BOCA RATON FL 33428	
DO NOT WRITE IN THIS SPACE			
2. Name and Address of Current Registered Agent NGUYEN THANG 22175 CRESSMONT PL BOCA RATON FL 33428		DO NOT WRITE IN THIS SPACE	
3. 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 signatures required when re-registering)		DATE _____	
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$850.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	NGUYEN THANG 22175 CRESSMONT PL BOCA RATON FL 33428		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	NGUYEN THUY 22175 CRESSMONT PL BOCA RATON FL 33428		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE 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)(b), 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: 		4/30/04 (561) 479 4940 Date Daytime Phone	

14022598



04282004 No Chg-P CR2E034 (10/03)

4. FEI Number **75-2981262** Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ **\$8.75 Additional
 Fee Required**