


FILED
Aug 17, 2007 8:00 am
Secretary of State

07-23-2007 90036 012 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000036535			
1. Entity Name TOKYO SUSHI, INCORPORATED			
Principal Place of Business 7832 WEST HIGHWAY 192 KISSIMMEE, FL 34747		Mailing Address 7832 WEST HIGHWAY 192 KISSIMMEE, FL 34747	
2. Principal Place of Business - No P.O. Box # 8111 VINELAND AVE Suite, Apt. #, etc.		3. Mailing Address 8111 VINELAND AVE Suite, Apt. #, etc.	
City & State Orlando, FL		City & State Orlando, FL	
Zip 32821	Country	Zip 32821	Country
4. FEI Number 42-1536154		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WANG, SHENG YI 7832 W. HIGHWAY 192 KISSIMMEE, FL 34747		7. Name and Address of New Registered Agent Name XIAO JUN ZHANG Street Address (P.O. Box Number is Not Acceptable) 8111 VINELAND AVE. City Orlando FL Zip Code 32821	
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: <u>[Signature]</u> ZHANG XIAO JUN DATE: 7-12-07 <small>Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when resigning)</small>			
- FILE NOW!!! - FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WANG, SHENG YI 7832 WEST HIGHWAY 192 KISSIMMEE, FL 34747 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. ZHANG, XIAO JUN 8111 VINELAND AVE Orlando, FL 32821 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WANG, SAM 7832 WEST HIGHWAY 192 KISSIMMEE, FL 34747 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 powers like empowered. SIGNATURE: <u>[Signature]</u> ZHANG XIAO JUN DATE: 7-12-07 DAYTIME PHONE: 407-465-1188 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			