

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000054645

Entity Name: MASUDAJIMA, INC.

FILED  
Aug 22, 2006  
Secretary of State

## Current Principal Place of Business:

4533 WILKINSON RD.  
SARASOTA, FL 34233 US

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 5085  
SARASOTA, FL 342775085 US

## New Mailing Address:

FEI Number: 01-0737032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAPNICK, BRUCE P ESQ.  
2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BARNGROVER, JAMES E  
Address: 4533 WILKINSON ROAD  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: BARNGROVER, DAVID L  
Address: 4533 WILKINSON ROAD  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: BARNGROVER, MATTHEW J  
Address: 4533 WILKINSON ROAD  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES E. BARNGROVER

PRES

08/22/2006

Electronic Signature of Signing Officer or Director

Date