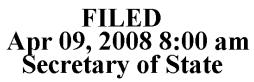
2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P02000068336



Daytime Phone #

1. Entity Nam FUJI SUS		ACKSONVILLE II	NC.						04-09-200	8 9003	2 029) ***15	50.00
Principal Place of Business 4495 ROOSEVELT BLVD #314 JACKSONVILLE, FL 32210				Mailing Address 4495 ROOSEVELT BLVD #314 JACKSONVILLE, FL 32210					3046	(MSIO) 2M116	6 71 8 1 181	22 111 22 1111 2	Bertaet (1 Paul
Principal Place of Business - No P.O. Box #													
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				03262008	Chg-P	CF	R2E03	4 (12/06	6)
City & Stat	е		City	/ & State				4. FEI Numb 35-450					Applied For Not Applicable
Zip		Country	Zip		Coun	try		5. Certificate	of Status Desire	ed 🗆		8.75 A ee Requi	Additional ired
	6. Name	and Address of Curre	nt Register	ed Agent		Name		7. Name and	Address of Ne	w Registe	ered A	gent	
LIU, YI G 4495 ROOSEVELT BLVD #314 JACKSONVILLE, FL 32210						ess (F	P.O. Box Numb	er is Not Accepta	able)				
						City					FL	Zip Co	ode
	named entiti ions of regis		for the purp	oose of changing its	registere	ed office or reg	gistere	ed agent, or bo	th, in the State o	f Florida.	I am fa	 ımiliar wit	th, and accept
SIGNATURE_	Signature, typed	or printed name of registered ag	nt for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept gent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees ND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Change Addition Addition Delete TITLE Change Addition Addition NAME Change C										
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 8 Fee will be \$550	0.00										
10.	,	OFFICERS AN	ID DIRECTO	ORS	11.			ADDITIONS	CHANGES TO	OFFICERS	AND I	DIRECTO	ORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DSEVELT BLVD #314 NVILLE, FL 32210	4	☐ Delete	NAM! STRE	E ET ADDRESS						☐ Change	e 🔲 Addition
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indicated of the cor	on this reportion or the	e information supplied w rt or supplemental repor he receiver or trustee en achment with an addres	t is true and opowered to	accurate and that report	ny signat as requi	ture shall have	the s	ame legal effe	ct as if made und	der oath; ti	hat I ar	n an offic	er or director