

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90257 030 ***150.00

DOCUMENT # P02000096645

1. Entity Name
MEIKO OF TAMPA, INC.



Principal Place of Business
6-27, 1- CHOME, IMAZU-KITA
TSURUMI-KU, OSAKA, JAPAN 53800-41
OC

Mailing Address
6-27, 1- CHOME, IMAZU-KITA
TSURUMI-KU, OSAKA, JAPAN 53800-41
OC

2. Principal Place of Business
5423Sand Crane Court
Suite, Apt. #, etc.

3. Mailing Address
5423Sand Crane Court
Suite, Apt. #, etc.

City & State
Wesley Chapel, FL

City & State
Wesley Chapel, FL

Zip 33543 **Country** USA

Zip 33543 **Country** USA

4. FEI Number
13-4212242

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JACOBSON, RICHARD A
501 E KENNEDY BLVD, STE 1700
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name
Kimie Ishii Radke

Street Address (P.O. Box Number is Not Acceptable)
5423Sand Crane Court

City Wesley Chapel **FL** **Zip Code** 33543

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 *Kimie Ishii Radke*
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YAMASHIA, FUMIICHI 6-27, 1- CHOME, IMAZU-KITA TSURUMI-KU, OSAKA, JAPAN 53800-41	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Vice President Chikara Yamashita 5423Sand Crane Court, Wesley Chapel, FL 33543	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *CHIKARA YAMASHITA* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 14, 2003 *727-420-8991*

Date

Daytime Phone #

CR2E034 (10/02)