

Apr 21 04 01:56p

M. Tachibana, CPA, PA

FILED
May 24, 2004 8:00 am
Secretary of State

04-26-2004 91008 050 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000065521																																															
1. Entity Name HARRISON STREET SUSHI JAZZ CAFE, INC.																																															
Principal Place of Business 1902 HARRISON STREET HOLLYWOOD, FL 33020 US			Mailing Address 1902 HARRISON STREET HOLLYWOOD, FL 33020 US																																												
2. Principal Place of Business			3. Mailing Address																																												
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																												
City & State			City & State																																												
Zip		Country		Zip																																											
6. Name and Address of Current Registered Agent BRIEN, JOSEPH ESQUIRE 1902 HARRISON STREET HOLLYWOOD, FL 33020				7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ FL Zip Code: _____																																											
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: _____ DATE: _____																																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00																																															
9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees																																															
10. OFFICERS AND DIRECTORS																																															
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																															
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information reported 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 a 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 I am an officer or director, or on an attachment with an address, with all other like empowered.																																															
SIGNATURE: <u><i>Max Siripol</i></u> 4/21/04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																															