

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03544

Entity Name: CHUGIN (U.S.A.), INC.

FILED
Feb 11, 2007
Secretary of State

Current Principal Place of Business:

CORPORATION TRUST CENTER
801 N. MAGNOLIA 502
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

CORPORATION TRUST CENTER
801 N. MAGNOLA 502
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 51-0279670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KONAKA, MASAHIKA
Address: 3-5-8 GINZA CHUO-KU
City-St-Zip: TOKYO, JAPAN,

Title: AS () Delete
Name: TSUJI, KEIZABURO
Address: 1270 AVE OF THE AMERICAS SUITE 1815
City-St-Zip: NEW YORK, NY 10020

Title: DVTS () Delete
Name: YASUOKA, KEN-ICHI
Address: 1270 AVE OF THE AMERICAS SUITE 1815
City-St-Zip: NEW YORK, NY 10020

Title: D () Delete
Name: KONAKA, MASAYOSHI
Address: 3-5-8 GINZA CHUO-KU
City-St-Zip: TOKYO, JAPAN,

Title: D (X) Delete
Name: OKAMOTO, MORIHIRO
Address: 2771 PLAZA SWL AMO STE 806
City-St-Zip: TORRANCE, CA 90503

Title: AS (X) Delete
Name: TANAKA, YOSHIO
Address: 801 N MAGNOLIA STE 502
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTSD (X) Change () Addition
Name: OKIYAMA, ZENJI
Address: 1270 AVE OF THE AMERICAS SUITE 1815
City-St-Zip: NEW YORK, NY 10020

Title: D (X) Change () Addition
Name: OKAMOTO, MORIHIRO
Address: 2771 PLAZA DEL AMO STE 806
City-St-Zip: TORRANCE, CA 90503

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: T SHEPARD BURR

CPA

02/11/2007

Electronic Signature of Signing Officer or Director

Date