

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P04000118337

1. Entity Name  
MAYUMI ENTERTAINMENT INC.



Principal Place of Business  
9906 SW 5 STREET CIRCLE  
MIAMI, FL 33174

Mailing Address  
9906 SW 5 STREET CIRCLE  
MIAMI, FL 33174

**FILED**  
**Jan 24, 2007 08:00 AM**  
**Secretary of State**



01172007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1563042	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

HASEGAWA, JOSEFINA M MRS  
4705 SW 7 STREET  
MIAMI, FL 33134

**DO NOT WRITE  
IN THIS SPACE**

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

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, 2007 Fee will be \$550.00**

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

000000600819  
01/26/07-80024-011 158.75

**DO NOT WRITE  
IN THIS SPACE**

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	HASEGAWA, MAYUMI F MRS
STREET ADDRESS	9906 SW 5 STREET CIRCLE
CITY-ST-ZIP	MIAMI, FL 33174
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/07

Date

Daytime Phone #