

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000168106

1. Entity Name
MOKAJIRO, INC.



FILED

07 OCT 26 AM 9:42

Principal Place of Business
800 NW 141ST AVENUE
#209
PEMBROKE PINES, FL 33028

Mailing Address
800 NW 141ST AVENUE
#209
PEMBROKE PINES, FL 33028

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

03-16-07 90031 021 \$150.00



2. Principal Place of Business - No P.O. Box #

893 SW 120th Way

3. Mailing Address

893 SW 120th Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Davie, FL

City & State

Davie, FL

Zip

33325

Country

BROWARD

Zip

33325

Country

BROWARD

1019200 REINSTATEMENT FEE 98 (1/07) 07

4. FEI Number

20-4012698

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TSUJI, YUKARI
800 NW 141ST AVENUE
#209
PEMBROKE PINES, FL 33028

7. Name and Address of New Registered Agent

Name

TSUJI, YUKARI

Street Address (P.O. Box Number is Not Acceptable)

893 SW 120th Way

City

DAVIE

FL

Zip Code

33325

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]

YUKARI TSUJI

10/23/07

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 January 1, 2008, Fee will be \$300.00

paid in March 2007

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
TSUJI, YUKARI
800 NW 141ST AVENUE #209
PEMBROKE PINES, FL 33028 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
[Signature] ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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TITLE
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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TSUJI, YUKARI
893 SW 120th Way
DAVIE, FL 33325 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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]

10/23/07

754-423-0223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #