

2007 FOR PROFIT CORPORATION ANNUAL REPORT

3/2/2007-90019-031-\$150.00-\$150.00

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000112821

1. Entity Name
GINZA, INC.



Principal Place of Business
176 OXFORD ROAD
FERN PARK, FL 32730 US

Mailing Address
176 OXFORD ROAD
FERN PARK, FL 32730 US

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT
02218015 Cb9-PJ... CR2E034 (12/06)

4. FEI Number
87-0780874

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KANG, SONG Y
176 OXFORD ROAD
FERN PARK, FL 32730

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P, D
NAME KANG, SONG Y
STREET ADDRESS 3440 GOLDENROD ROAD, #1312
CITY-ST-ZIP WINTER PARK, FL 32792

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

REINSTATEMENT

2/21/2007 407-242-116
Date Daytime Phone #

GINZA, INC
176 Oxford Road
Fern Park, FL 32730

November 5, 2007

TO: FLORIDA DEPT OF REVENUE

Division of Corporation.

GINZA, INC

Tax ID: 87-0780874

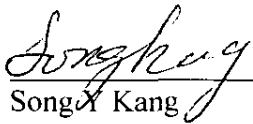
Document #P06000112821

I received a reinstatement notice dated on October 18, 2007. I filed a annual report for year 2007 on February 26, 2007 with a payment of \$150.00. You returned my annual report form back, which I don't know why. I enclosed a copy of my cleared check for a renewal fee of \$150.00.

I request a waiver of reinstatement fee of \$600.00 since I paid a renewal fee of \$150.00 in timely manner.

I'll greatly appreciate your prompt action.

Sincerely,


Song Kang
President