2000 UNIFORM RUSINESS REPORT (URR)

| 2000 | UNIFORM BUSI | NESS REPOF | RT (UBF | ?) | | poge | 104: | ン~ | ,* | |
|---|---|---|----------------------------------|---|-------------------------------------|---|--------------|------------------------|-----------------------------|--|
| | MENT # P08922 | | | poge 1 of 2 | | | | | | |
| 1. Entity Name NNR AIR | . : | ļ | | 00 OCT 16 | | | | | | |
| | | · | | | | | | | | |
| Principal Place of Business 8784 NW 18TH TERRACE SUITE 204 MIAMI FL 33172 US | | Mailing Address 450 E DEVON STE 260. ATTN: ALICE KROCZKA ITASCA IL 60143 US | | | | | Bee P | | 1011 93011 19 0 1 | |
| 2. Principal Pl | ace of Business | 3. Mailing Address | | | | | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | DO NOT WRITE I | N THIS SI | PACE | | |
| City & State | | City & State | | 4. | FEI Number | 36-2719768 | | <u> </u> | oplied For ot Applicable | |
| Zip | Country Zip Cou | | Country | 5. | Certificate of S | Status Desired | | 8.75 Add ee Require | | |
| | 7. Name and Address of New Registered Agent | | | | | | | | | |
| CT (| Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | | |
| 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 | | | Street At | Sueet Address (F.O. Box Number is Not Acceptable) | | | | | | |
| | | | City | _ , | | <u></u> | FL | Zip Cod | e | |
| 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. | | | | | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | | |
| | | FU F NOWIN | FEE IS \$550.0 | | Tellistating) | | | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) After SEPTEMBER 13, 2 Make Check Payable | | | 2000 Min. will | be \$750.00 | · • | on Campaign Finan Fund Contribution. | cing | | 00 May Be of to Fees | |
| 11, | OFFICERS AND | | 12. | | | IANGES TO OFFICE | | | | |
| NAME STREET ADDRESS | C Delete TITL NOGAMI, YOSHIO NO. 9 KOWA BLDG. 8-10, AKASAKA 1-CHOME STRE | | | | 40003441474—4, -10/27/0001807006 | | | | | |
| CITY-ST-ZIP | TOKOYO JA | CITY-ST-ZIP | ****550.00 ****558.00 | | | | | | | |
| title Name | D Nokuo, akira (ASST. SEC) | TITLE NAME | | | | | ☐ Change | Addition | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | | | | | |
| TITLE | PS | -TITLE | | - | | | (X) Change | Addition | | |
| NAME STREET ADDRESS | KITAKOGA, MASAJI 450 E DEVON, ŠTE 260 | NAME STREET ADDRESS | . ~ | i Kitako Kowa Blo | oga ig. 8-10, A | lkacal | ca 1-Ci | n o m o | | |
| CITY-ST-ZIP | ITASCA IL | | CITY-ST-ZIP | 1 | , Japan | | | | | |
| title Name | D Sasaki, Iwao | 5 Delete | TITLE NAME | PSD | oki Miya | ani+a | | L Change | XX Addition | |
| STREET ADDRESS | NO. 9 KOWA BLDG. 8-10, AKA | STREET ADDRESS CITY-ST-ZIP | 1 | | Ste 260 | | | | | |
| CITY-ST-ZIP | TOKOYO JA ST | ☐ Delete | TITLE | I tasc | a, IL (| 50143 | **** | ☐ Change | Addition | |
| NAME STREET ADDRESS | HATA, KAZUNORI 450 E. DEVON SUITE 260 | NAME STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | ITASCA IL 60143 | CITY-ST-ZiP | | · · · | | | | | | |
| TITLE NAME | D Bolte, Peter | ☐ Delete | TITLE NAME | | 12 | | | ☐ Change | Addition | |
| STREET ADDRESS | 450 E. DEVON SUITE 260 | | STREET ADDRESS | | | | | | | |
| City-St-ZiP | ITASCA IL 60143 certify that the information supplied with | this filing does not qualify for t | CITY-ST-ZIP the exemption sta | ted in Sectio | n 119.07(3)(i). l | Florida Statutes. I fu | urther cert | ify that the i | information | |
| indicated of the cor | on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address, | s true and accurate and that my owered to execute this report a | a sionature shall h | lave the sam | e legal effect a: | s it made under oat | in: inat l a | m an officer | r or director | |

SIGNATURE AND PIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:



NNR AIRCARGO SERVICE (USA) INC.

pagerul

October 17, 2000

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Attn: Tyronne

Re: NNR Aircargo Service (USA) Inc.

Dear Tyronne:

As per our conversation today, enclosed please find our check #52937 in the amount of \$550.00. As explained, we did not receive the first notice nor have we received any notification of revocation. We originally submitted the Business Report was originally sent to your office on 09/29/00.

Please waive any delinquent fees.

If you have any questions, please do not hesitate to contact me.

Thank you for your assistance.

Sincerely,

NNR AIRCARGO SERVICE (USA) INC.

Alice T. Kroczka
Administration Manager
kroczka@nnrusa.com

Encls.

ATK/