FILED

Apr 20, 1999 8:00 am Secretary of State

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Mailing Address

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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P23410

1. Corporation Name

Principal Place of Business 8054 EAST INDEDIAL INCHES

AMERICAN SUZUKI MOTOR CORPORATION

Brea ca 92821	-6722	BREA CA 928	BREA CA 92821-6722			DO NOT WRITE IN THIS	SPACE	
us us						3. Date Incorporated or Qualifed		
						03/15/1989		
2 Driveinal D	ace of Business	2a. Mailing A	ddrees			4. FEI Number	Apr	olied For
2. Principal Pi	ace of business	— ř	duless			93-0928739	<u> </u>	Applicable
21	# 440	26 Suite, Ap	t # etc			93-0926739	\$8.75 A	
Suite, Apt.	#, etc.	27				5. Certificate of Status Desired	Fee Rec	
City & State	e	City & St	ate			6. Election Campaign Financing	\$5.00 1	- 1
23		28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	_	Country		8. This corporation owes the current year In		_
24	25	29	30	0		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Cu	urrent Registered Age	ent			10. Name and Address of New Registered	Agent	
				81	Name			
CT CORPORATION SYSTEM				82 Street Ad		Address (P.O. Box Number is Not Acceptable)		
1200 S. PINE ISLAND ROAD			04	Street	Rudiess (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			83	_				
				84	City	FL	85 Zip C	ode
11 Burningt	to the provisions of Sections 607	7 0502 and 607 1508 T	Iorida Statutes	the above	i e-named (corporation submits this statement for the purpose o	changing its	registered
office or r	egistered agent, or both, in the S	State of Florida. Such c	hange was auth	norized by	tne corpo	ration's board of directors. I hereby accept the appo	intment as reg	istered
agent. I a	m familiar with, and accept the o	bligations of, Section 6	07.0505, Florida	a Statutes	•			
SIGNATURE						nurred when reinstating) DATE		
	Signature, typed or printed name of registere		(NOTE: Re	13.	nt signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.		S AND DIRECTORS	DELETE				Change	Addition
TITLE	Р	<i>></i>	D DETE IS	1.1 TITLE		PRES 108NT	Change	X / NOONION
NAME	nakamura, manabu			1.2 NAME]	RYOSAKU SUZUKI		i
STREET ADDRESS	3251 E. IMPERIAL HWY.		ľ	1.3 STREET	TADDRESS	3251 E. IMPERIAL HUM		
CITY-ST-ZIP	BREA CA			1.4 CITY-S	T-ZIP	BACK CA 92821		
TITLE	TS	. [☐ DELETE	2.1 TITLE		•	☐ Change	☐ Addition
NAME	AYUKAWA, KENICHI							
	ATUKAWA, KENIUHI			2.2 NAME				_
STREET ADDRESS				2.2 NAME 2.3 STREET	T ADDRESS			_
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CITY-ST-ZIP TITLE NAME	3251 E IMPERIAL HWY BREA CA V MIYASHITA, TAKESHI	· .	DELETE	2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ST-ZIP	<u></u>	☐ Change	Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.