## FILE NOW: FILING FEE AFTER MAY 1 \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 08 1997 8:00am Secretary of State

|                                | Of Business       |                                                                                                         | м<br>20<br>St  | (6) lailing Address 83 SIXTH AVE. JITE 900 ATTLE WA 96121-286 | )6       | ,                    |                |         | 3. Date Incorporated or Qualified 03/29/1990                                                                                    | 3a. Dai      | te of Last R       |               |
|--------------------------------|-------------------|---------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------|----------|----------------------|----------------|---------|---------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------|---------------|
| 2. Principal Place of Business |                   |                                                                                                         |                | 2a. Mailing Address                                           |          |                      |                |         | 4. FEI Number                                                                                                                   |              | Ap                 | oplied For    |
| 21                             |                   |                                                                                                         | 26             | [26]                                                          |          |                      |                |         | 91-1477463                                                                                                                      |              |                    | ot Applicable |
| Suite, Apt. #, etc             |                   |                                                                                                         | 0.77           | Suite, Apt. #, etc.                                           |          |                      |                |         | 5. Certificate of Status Desired                                                                                                |              | \$8.75 /<br>Fee Re |               |
| City & State                   |                   |                                                                                                         | -   (1         | City & State                                                  |          |                      |                |         | 6. Election Campaign Financing                                                                                                  |              | \$5.00             | <del>'</del>  |
| 23                             |                   |                                                                                                         | 28             | <del> </del>                                                  |          |                      |                |         | Trust Fund Contribution                                                                                                         |              | Added 1            |               |
| Zip<br>24                      | Country Zip 25 29 |                                                                                                         |                | Zip                                                           | Counti   |                      |                |         | 8. This corporation has liability for Florida Statutes                                                                          | intangible i |                    | . 199.032,    |
|                                |                   | and Address of Curre                                                                                    | nt Regi        | tered Agent                                                   |          |                      | 7              |         | 10. Name and Address of New Re                                                                                                  | gistered A   | gent               |               |
|                                |                   | ion system                                                                                              |                |                                                               |          | 61                   | Nam            | e       |                                                                                                                                 |              |                    | 1             |
|                                |                   | SLAND ROAD                                                                                              |                |                                                               |          | 82                   | Stree          | t Addre | ss (P.O. Box Number is Not Acceptable)                                                                                          |              |                    |               |
| PLAI                           | ntation f         | L 33324                                                                                                 |                |                                                               |          | 83                   | <del> </del> - |         |                                                                                                                                 |              |                    |               |
|                                |                   |                                                                                                         |                |                                                               |          |                      | ļ              |         |                                                                                                                                 | .=           |                    |               |
|                                |                   |                                                                                                         |                |                                                               |          | 84                   | City           |         |                                                                                                                                 | Fi.          | 85 Zip (           | Code          |
| SIGNATURE                      |                   | ent, or both, in the Stat<br>th, and accept the oblin<br>or prior dinancial registered a<br>OFFICERS Af | gent and title | of applicable. (F                                             |          |                      |                |         | oration submits this statement for the poin's board of directors. I hereby accept when reinstains:  ADDITIONS/CHANGES TO OFFICE | DATE         |                    |               |
| Title (                        | CD                | OH ICENS A                                                                                              | ND DINE        | DELETE                                                        | <u> </u> | 1.1 TITLE            |                | T       | ADDITIONS/CHANGES TO OFFIC                                                                                                      | LIIG AND     | Change             | Addition      |
| NAME                           | TAKESUE           | . HISAYA                                                                                                |                | <del></del>                                                   | )        | 1.2 NAME             |                | 1       |                                                                                                                                 |              |                    |               |
| STREET ADDRESS                 |                   | AVE., STE. 900                                                                                          |                |                                                               |          | 1.3 STREE            | T ADDRES       | 3       |                                                                                                                                 |              |                    | ĺ             |
| CITY-ST-ZIP                    | SEATTLE           | WA                                                                                                      |                |                                                               |          | 1.4 CITY+            | ST-ZIP         | 1       |                                                                                                                                 |              |                    |               |
| THLE                           | PD                |                                                                                                         |                | ☐ DELETE                                                      |          | 2.1 TITLE            |                |         |                                                                                                                                 |              | Change             | Addition      |
| NAME                           | OMURO,            |                                                                                                         |                |                                                               |          | 2.2 NAME             |                | 1       |                                                                                                                                 |              |                    |               |
| STREET ADDRESS                 |                   | AVE., STE. 900                                                                                          |                |                                                               | }        |                      | T ADDRES       | 3       |                                                                                                                                 |              |                    | }             |
| CITY -ST-7-P                   | SEATTLE<br>V D    | YIA                                                                                                     |                | DELETE                                                        | ╂┈┤      | 2 4 CITY<br>31 TITLE | \$1 - Z)P      | +_      |                                                                                                                                 |              | Change             | Addition      |
| NAMit                          |                   | A. TETSUHISA                                                                                            |                |                                                               | ۲ ا      | 3.2 NAME             |                | 12      | e arraphed sheer.                                                                                                               |              | - Change           | 1.00          |
| STREET ADDRESS                 |                   | AVE., STE. 900                                                                                          |                |                                                               |          |                      | T ADDRES       |         | e cleared sheet.                                                                                                                |              |                    |               |
| City-St-ZiP                    | SEATTLE           |                                                                                                         |                |                                                               |          | 3.4. CITY            |                | 1       |                                                                                                                                 |              |                    | }             |
| TITLE                          | VTSD              |                                                                                                         | .,             | ☐ DELETE                                                      |          | 4.1 TITLE            |                |         |                                                                                                                                 |              | Change             | Addition      |
| NAME                           |                   | ra, takashi                                                                                             |                |                                                               | ]        | 4.2 NAM              | Ē              |         |                                                                                                                                 |              |                    | ,             |
| STREET ADDRESS                 |                   | I AVE., STE. 900                                                                                        |                |                                                               | } }      | 4.3 STREE            | T ADDRES       | 3       |                                                                                                                                 |              |                    |               |
| CITY-ST-ZIF                    | SEATTLE           | WA                                                                                                      |                | DEC 275                                                       | -        | 4.4 CiTY-            | ST - ZIP       | 49      |                                                                                                                                 |              |                    | - Course      |
| TifLt                          | VAMAGE            | TAVIO                                                                                                   |                | ☐ DELETE                                                      |          | 5.1 TITLE            |                |         |                                                                                                                                 | ļ            | ☐ Change           | Addition [    |
| NAME<br>STREET ADDRESS         | KAWASE            | I AVE., STE. 900                                                                                        |                |                                                               |          | 52 NAME              |                |         |                                                                                                                                 |              |                    | ļ             |
| CITY-ST-7IP                    | SEATTLE           |                                                                                                         |                |                                                               |          | 5.4 CITY-            | T ADDRES       | `       |                                                                                                                                 |              |                    | ł             |
| JULE J                         | D                 | 7117                                                                                                    |                | DELETE                                                        | -        | 6.1 TITLE            | ∪1 · LIF       | +       | <del>.,</del>                                                                                                                   |              | Change             | Addition      |
| NAME                           | MORII, K          | DICHI                                                                                                   |                | - —                                                           |          | 6.2 NAME             |                |         | •                                                                                                                               |              | •                  | 1             |
| STREET ADDRESS                 |                   | AVE., STE. 900                                                                                          |                | - 1                                                           |          |                      | T ADDRES       | 3       |                                                                                                                                 |              |                    | Ì             |
| C:TY-ST-ZIP                    | SEATTLE           | WA                                                                                                      |                | 1                                                             |          | 6.4 CITY-            |                | L       |                                                                                                                                 |              |                    |               |
| 14. I do heret                 | ov certify tha    | t the information suppli                                                                                | ed with t      | his filina does not a                                         | alify f  | or the ex            | emption        | stated  | in Section 119.07(3)(i), Florida Statute                                                                                        | s. I further | certify that       | the           |

I can be carry coming that the information insurprise with this ming occas not quality for the exemption stated in section 118.07(3)(i), Profide Statutes. Further certify that information indicated on this 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.

## List of Directors and Officers of Nichirel Foods, Inc.

| <u>Title</u> | Name               | Address                                     |  |  |  |  |  |  |
|--------------|--------------------|---------------------------------------------|--|--|--|--|--|--|
| C/D          | Hisaya Takesue     | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| P/D          | Toshio Omuro       | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| V/D          | Tetsuhisa Nakajima | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| V/T/S/D      | Takashi Nakamura   | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| V/D          | Takashi Asano      | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| V            | Takuo Kawase       | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| ٧            | Katsuhiko Shimizu  | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| D            | Koichi Morii       | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| D            | Sejjiro Nishida    | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| D            | Michael Burns      | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| D            | James Tune         | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |
| D            | Fumio Kita         | 2033 6th Ave., Suite 900, Seattle, WA 98121 |  |  |  |  |  |  |