

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29311

FILED
Jan 21, 2008
Secretary of State

Entity Name: SAPPORO U.S.A., INC.

Current Principal Place of Business:

18881 VON KARMAN
SUITE 420
IRIVNE, CA 92612 US

Current Mailing Address:

18881 VON KARMAN
SUITE 420
IRIVNE, CA 92612 US

New Principal Place of Business:

11 EAST 44TH STREET
SUITE 1710
NEW YORK, NY 10017 US

New Mailing Address:

11 EAST 44TH STREET
SUITE 1710
NEW YORK, NY 10017 US

FEI Number: 13-3220323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTONUCCI, BRUCE
2685 HANROB ROAD
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: MINAMI, MASASHI
Address: 707 CARDIFF
City-St-Zip: IRVINE, CA 92606

Title: EVP () Delete
Name: MINAMI, MASASHI
Address: 707 CARDIFF
City-St-Zip: IRVINE, CA 92606

Title: C () Delete
Name: HIGASHIYAMA, SADAHIRO
Address: J PARK HAMASAYAMA 402, 3-20-7 NARITANISHI
City-St-Zip: SUGINAMI-KU, TOKYO, JP 1660016

Title: P () Delete
Name: MASAWAKI, MIKIO
Address: 27 PHEASANT CREEK
City-St-Zip: IRVINE, CA 92618

Title: VPSM () Delete
Name: PRONIO, FRANK
Address: PMB 185, 283-B EGG HARBOR RD
City-St-Zip: SEWELL, NJ 08080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: MINAMI, MASASHI
Address: 50 W 34TH ST, APT #19C1
City-St-Zip: NEW YORK, NY 10001

Title: EVP (X) Change () Addition
Name: MINAMI, MASASHI
Address: 50 W 34TH ST, APT #19C1
City-St-Zip: NEW YORK, NY 10001

Title: C (X) Change () Addition
Name: HASHIBA, NOBUHIRO
Address: 1-14-1-306 NISHIWASEDA
City-St-Zip: SHINOUKU-KU, TOKYO, JP 1690051

Title: P (X) Change () Addition
Name: MASAWAKI, MIKIO
Address: 357 SHADOW OAKS
City-St-Zip: IRVINE, CA 92618

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MASASHI MINAMI

EVP

01/21/2008

Electronic Signature of Signing Officer or Director

_____ Date