

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 06 1998 8:00am
Secretary of State

DOCUMENT # P30506 (0)

1. Corporation Name JAPAN PACIFIC TRADING CORPORATION



Principal Place of Business

~~851 BURLWAY ROAD
SUITE 400
BURLINGAME CA 94010-1713
US~~

Mailing Address

~~851 BURLWAY ROAD
SUITE 400
BURLINGAME CA 94010-1713
US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **305 West Broad Street**
Suite, Apt. #, etc.

22 City & State

23 **Groveland, FL.**

24 Zip **34736** 25 Country **LAKE**

2a. Mailing Address

26 **305 West Broad Street**
Suite, Apt. #, etc.

27 City & State

28 **Groveland, FL.**

29 Zip **34736** 30 Country **LAKE**

3. Date Incorporated or Qualified

08/13/1990

4. FEI Number

95-4215442

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**CARLTON, FIELDS W . . . C
ONE HARBOUR PLACE
POST OFFICE BOX 3239
TAMPA FL 33801**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	TOMINAGA, YASUHIKO	
STREET ADDRESS	5097 LATROBE DRIVE	
CITY-ST-ZIP	WINDERMERE FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	TOMINAGA, YOKO	
STREET ADDRESS	851 BURLWAY ROAD, SUITE 400	
CITY-ST-ZIP	BURLINGAME CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	400002657534
3.3 STREET ADDRESS	-10/07/98--01041--030
3.4 CITY-ST-ZIP	***550.00
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE

Yoko Tominaga

9/18/98

(352) 429-2101

CR2E034 (5/98)