## FILED 2000 UNIFORM BUSINESS REPORT (UBR) Feb 14, 2000 8:00 am Secretary of State **DOCUMENT # P36918** NISSHIN CORPORATION USA, INC. 02-14-2000 90039 015 \*\*\*150.00 Mailing Address Principal Place of Business 150 EAST 58TH STREET 50 EAST 58TH STREET 17TH FLOOR 17TH FLOOR NEW YORK NY 10155-0002 NEW YORK NY 10155 US 3. Mailing Address 2. Principal Place of Business 150 East 58th Street 150 East 58th Street Suite, Apt. #, etc. 17th Floor DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 17th Floor Applied For City & State 4. FFI Number City & State 13-3577202 Not Applicable New York, New York New York, New York \$8.75 Additional Country 5. Certificate of Status Desired- --- ---10155 U.S.A. 10155 U.S.A. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HATTORI, TADASHI Street Address (P.O. Box Number is Not Acceptable) C/O HUNTER'S CREEK GOLF COURSE 14401 SPORTS CLUB WAY ORLANDO FL 32821 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or orinted name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition PD Delete TITLE TITLE KAMIYAMA, KAZUO KAMIYAMA, KAZUO NAME 5-8-1, SHINJUKU, SHINJUKU-KU STREET ADDRESS 5-8-1 SHINJUKU SHINJUKU KU STREET ADDRESS CITY-ST-ZIP TOKYO, JAPAN CITY-ST-ZIP TOKYO, JAPAN ☐ Change TITI F Delete VSD TITLE NAME HATTORI, TADASHI HATTORI, TADASHI NAME STREET ADDRESS 150 EAST 58TH ST., 17TH FLR. NEW-YORK, NY 101-55 150 E. 58TH ST. 17TH FLOOR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **NEW YORK NY 10155** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/01/00

(2/2) 980-1732