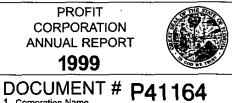
FILE NOW: FILING-FEE-AFTER MAY 1ST-IS-\$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

MARUTO SEA VEGETABLES, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Apr 14, 1999 8:00 am Secretary of State Katherine Harris

04-14-1999 90173 010 ***150.00

|--|

							<i>i</i> n f ili: hit h fili	i didil 0:1 1; (14)
Principal Place	of Business	Mailing Address				 	TIL MENTI MINIT MENT	1 81815 61811 1881
1487 W. 178TH ST. 1487 W. 178TH ST.								
1 F		1 F	1 F			DO NOT WRITE IN T	LIC COACE	
GARDENA CA 9	0248	GARDENA CA 90248				DO NOT WRITE IN T	115 SPACE	
US		US	us			3. Date Incorporated or Qualifed 10/26/1992		·
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For		
21		26	26			-33-02368 <u>68</u>	1 .	Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional Required
City & State			City & State			6. Election Campaign Financing	\$5.0	0 Мау Ве
23		28	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year		12No
24	25	29	30			Personal Property Tax.	Yes	цило
Name and Address of Current Registered Agent					Mama	10. Name and Address of New Register	ea Agent	
VI C	ORPORATE SERVICES, INC.			81	Name			
344 (82	Street Addres	ss (P.O. Box Number is Not Acceptable)		, ,	
TALL	AHASSEE FL 32301		Ì	83	,			
				84	City	; ; F	85 Zip	Code
office or re agent. I an SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change wations of, Section 607.0505	as authonzed , Florida Statu	by ti	ne corporation	ration submits this statement for the purpose is board of directors. I hereby accept the ap	pointment as	registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered 12. OFFICERS AND DIRECTORS 13.					signature required i	ADDITIONS/CHANGES TO OFFICERS		TORS IN 12
12.	P OPFICERS A	DELET		1.5		ADDITIONS/OFFATOES TO OFFICE AC	Change	
TITLE	•		•					
NAME	OKAZE, MUNEHIRO		1.2 NA					ļ
STREET ADDRESS	1487 W. 178TH ST. 1F				ADDRESS			
CITY-ST-ZIP	GARDENA CA		1,4 CIT		ZIP		Change	e Addition
TITLE	V	C Dereil	1				¢g.	,,
NAME _	OKAZE, TADAYUKI	- '	2.2 NA					
STREET ADDRESS	1487 W. 178TH ST. 1F		`		ADDRESS			ļ
CITY-ST-ZIP	GARDENA CA	Classes	2. 4 Ci		-ZIP		Change	e Addition
TITLE	\$	☐ DELET	1					·
NAME	KATO, SHIZUKO		3.2 NA					ļ
STREET ADDRESS	1487 W. 178TH ST. 1F				ADDRESS			
CITY-ST-ZIP	GARDENA CA		3,4, CI		-ZIP		Chona	e
TITLE		☐ DELET					Chang	3 D'AOUILOII
NAME		•	4.2 N	ME				
STREET ADDRESS			4.3 ST	REET /	ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-	ZIP	, 1701		
TITLE		: DELET			}		Chang	e 🗌 Addition
NAME			5.2 NA					!
STREET ADDRESS					ADDRESS			ļ
CITY-ST-ZIP			5.4 CT		ZIP			
TITLE		☐ DELET					☐ Change	e 🗍 Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET /	ADDRESS			. }
CITY-ST-ZIP		<u></u>	6.4 CFI	Y-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, with all other like empowered.

SIGNATURE:

KECUM OKAZE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/99

(310) 538-0100

Daytime Phone #