

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000020267

Entity Name: HONG KONG TOKYO INC.

FILED
Apr 21, 2005
Secretary of State

Current Principal Place of Business:

10250 TREVOR CREEK DR. WEST
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

10250 TREVOR CREEK DR. WEST
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 65-0408784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUIE, JAKE
10250 TREVOR CREEK DRIVE WEST
JACKSONVILLE, FL 32257 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: P () Delete
Name: LOUIE, JAKE
Address: 10250 TREVOR CREEK DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32257

Title: V () Delete
Name: WONG, LAI HING
Address: 10250 TREVOR CREEK DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAI HING WONG

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date