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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 23 1997 8:00am Secretary of State

1997 DOCUMENT # P93000021979 (8)

KODEN INTERNATIONAL, INC.

Principal Place of Business Mailing Address								
11001 ROOSEVELT BLVD.		11001 ROOSEV	elt blvd.					
800   ST. PETERSBURG FL 33716		900 97 DETERORUI	00 El 227(6.22	20				
US		U\$	ST. PETERSBURG FL 33716-2338 US			3. Date Incorporated or Qualified	3a. Date of Last f	Report
						03/19/1993	04/22/1996	·
· `	Place of Business	F	2a. Mailing Address			4. FEI Number	A	pplied For
Suite, Apl	# A1-	26	Suite, Apt. #, etc.			04-2850136		ot Applicable
22	#, Eff.	27 Suite, Apr.				5. Certificate of Status Desired	1 1 +	Additional lequired
City & Sta	te		City & State			6. Election Campaign Financing		···
23		28	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip			Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	25   29   30   9. Name and Address of Current Registered Agent			L	Florida Statutes Yes No			
		ent Registered Agen	t .	81	Name	10. Name and Address of New R	egistered Agent	
NELSON, CHARLES G 11001 ROOSEVLET BLVD.								
	TE 800			82 Street Addre		Address (P.O. Box Number is Not Accepta	ible)	
ST. PETERSBURG FL 33716				83				
				84	City		last 7:-	O- 4-
				1	•			Code
11. Pursuant office or	to the provisions of Sections 607.0	502 and 607,1508, Fig.	orida Statutes, i	the above	a-named	corporation submits this statement for the oration's board of directors. I hereby according to the control of t	purpose of changing i	ts registered
agent. La	am familiar with and accept the obl	igations of Section 60	7.0505, Florida	a Statutes	S.	cration's board of directors. Thereby accu	spi ine appointment as	, registered
SIGNATURE	The state of the s							
12.	Signature, typed or punted name of registered a OFFICERS A	ND DIRECTORS	(NOTE: Re	gislered Age	nt signature	required when reinstaling) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTOR	9S IN 12
11111 E	D		DELETE	1.1 TITLE			☐ Change	Addition
NAME	ITO, YOSHIMASA			1.2 NAME				
STREET ADORESS	2-10-45 KAMI OSAKI SHINAG	iwa ku		1.3 STREET	ADDRESS			
CITY - ST-ZIF	TOYKO, JAPAN			1.4 CITY-S	T-ZIP			
TIILE	- ·		2.1 TITLE			Change	Addition	
NAME	44000 DOODEN'T DIAD		2.2 NAME		νος. Ν · · · ·	D #1	enn	
STHEET ADDRESS	OLEADAUATED EL DADAO		2.3 STREET		11001 ROOSEVELST PETERSBURG	1 20 20 2	31/	
CITY-ST-ZIP	OCTURNITY I F 04010		DELETE	2.4 CITY-5	11 - ZIP	SI PETERS BURG	Change	Addition
NAME		₩.		3.2 NAME			Change	L. AUUIIIUI
STREET ADDRESS				3.3 STREET	ADDRESS			
CHY-S₹-Z⊮				3.4. CITY- S	T-ZIP			
TELE			DELETE	4.1 TITLE			☐ Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	address			ļ
CHY-ST-ZIP			DELETE	4.4 CITY-S	T-ZIP		T Observe	1 1 4 4 2 V
NAME		نا	OFFEIE -	5.1 TITLE			☐ Change	Addition
STREET ADDRESS				5.2 NAME 5.3 STREET	ADDRESS			
COTY-S1-ZIP			ı	5.4 CITY-5				
TITLE			DELETE	6.1 TITLE	1 - \$11		Change	Addition
NAM:		<del></del>		6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY - \$1 - 7/P				6.4 CITY-S				
14 Lela hara	har cost for these they information surpose	and the Main All and all and				-111- O11 440 07/07/0 Ft 11 O1		

4. I do 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:

CONTRACTOR OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-576-5995