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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000012798**1. Corporation Name

ONE WORLD TAIKO, INC.

02							
Principal Place	of Business	Mailing Address				- 1,000,100,710,181/, 0;01, 00/;1 00/;1 00/; 00/; 00/0, 10/0, 12//; 108/0 10/0, 10// 480/ -	
6713 W 53RD AVE		6713 W 53RD AVE					
ARVADA CO 80002		ARVADA CO 80002			DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualifed		
						02/07/1994	
2 Deineinal D	ace of Business	2a. Mailing Address				4. FEI Number Applied For	\dashv
— ·	ace of business	26 P.O. Box 12252				59-3223210 Not Applicable	<u>-</u>
Suite, Apt.	# etc.	Suite, Apt. #, etc.				\$8.75 Additional	٦
22	.,	27				Certifcate of Status Desired Fee Required	_
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be	-
23		Denver, CO			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	`			8. This corporation owes the current year Intangille	
24	25	29 80212-0252 3	<u> US</u>	A		Personal Property Tax. Yes No	-
	9. Name and Address of Currer	nt Registered Agent		141 1		10. Name and Address of New Registered Agent	\dashv
DDAI	DECORD CARTER A		•	31 N	lame		
BRADFORD, CARTER A 130 HILLCREST ST.			18	32 S	Street Address (P.O. Box Number is Not Acceptable)		
			.				\dashv
	E 310 ANDO FL 32801			33			
UNL	ANDO FL 32001		1	34 C	City	FL 85 Zip Code	
	227.05	10074500 51 11 01-14	45	1			-{
office or r	egistered agent, or both, in the State	of Florida. Such change was auti	nonzea i	ov tne	corporation	oration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered	-
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	a Statut	es.		•	1
SIGNATURE	2)	et and title if perlicable /NOTE: Br	anistanad A	aent sia	nature required t	when reinstating) DATE	- [
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	コ
TITLE	PT	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition	n l
NAME	TSUJIMOTO, GARY S		1.2 NAME				- }
STREET ADDRESS	6713 W 53RD AVE		1.3 STREE		DRESS		
CITY-ST-ZIP	ARCADA CO		1.4 CITY-5		P		_
TITLE	S	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition	nc
NAME	OZAKI, NANCY J		2.2 NAME			•	
STREET ADDRESS	6713 W 53RD AVE	、	2.3 STREE		DRESS	and the second of the second o	Į
CITY-ST-ZiP	ARVADA CO		2,4 CITY-5		IP		_
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Additi	on
NAME			3.2 NAME		-		-
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CITY-ST-ZIP			3.4. CITY-		IP		_
TITLE	,	☐ DELETE	4.1 TITLE			☐ Change ☐ Additi	JD
NAME		•	4. 2 NAME				
STREET ADDRESS			4.3 STREI		DRESS		
CITY-ST-ZIP			4.4 CITY-		P	☐ Change ☐ Additi	_
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition	"]
NAME				5.2 NAME			
STREET ADDRESS				3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-5 6.1 TITLE		<u>- </u>	☐ Change ☐ Additi	_
πιε		☐ DELETE				_ Citalige ☐ Addition	"
NAME			6.2 NAME 6.3 STREET ADDRESS		DOESS	•	}
STREET ADDRESS	l		± 0.3 ℃ IK	EE I AU	nutroo		- 1

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90040 014 ***158.75