

**CORPORATION
ANNUAL REPORT
1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000031339 (2)

1. Corporation Name

IDA MOTO INC.

95 MAY -1 PM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2604 HERON LANDING COURT
ORLANDO FL 32837

Mailing Address

2604 HERON LANDING COURT
ORLANDO FL 32837

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/26/1994

3a. Date of Last Report

4. FEI Number

59-3224718

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☒ No

2. Principal Place of Business

7460 Republic Dr., Orlando, FL 32819

2a. Mailing Address

2604 Heron Landing Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando

City & State

Orlando.

Zip

FL 32819

Country

orange

Zip

FL 32837

Country

orange

9. Name and Address of Current Registered Agent

SHIROTA, YAYOI
2604 HERON LANDING COURT
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

SHIROTA YAYOI

NOTE: Registered agent signature required when resubmitting

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

IDA, MOTONOBU

STREET ADDRESS

7536 REPUBLIC DRIVE

CITY, ST, ZIP

ORLANDO FL 32819

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P. D.

☒ Change ☐ Addition

1.2 NAME

IDA MOTONOBU

1.3 STREET ADDRESS

2460 Heron Landing Ct.

1.4 CITY, ST, ZIP

Orlando, FL 32837

2.1 TITLE

V. D.

☒ Change ☐ Addition

2.2 NAME

SHIROTA YAYOI

2.3 STREET ADDRESS

2460 Heron Landing Ct.

2.4 CITY, ST, ZIP

Orlando, FL 32837

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing, or on an attachment with this filing.

SIGNATURE:

YAYOI SHIROTA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-22-95

(409) 384-3836