


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

FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000038499 (7)**

1. Corporation Name

SJ CLEARWATER FOOD INC.



Principal Place of Business SAKKIO JAPAN. CLEARWATER MALL 20505 US HIGHWAY 19 NORTH, SUITE 152 CLEARWATER FL 34624	Mailing Address SAKKIO JAPAN C/O ROYAL CREST COURT UNIT 5 MARKHAM, ONTARIO CANADA L3R -9X5
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/18/1994

4. FEI Number

59-3388787

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHOMPOONICH, MR. EDDY
11803 N.W. 13TH ST.
PEMBROKE PINES FL 33026**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	CHOMPOONICH, EDDY	
STREET ADDRESS	11803 N.W. 13TH ST.	
CITY-ST-ZIP	PEMBROKE PINES FL 33026	

TITLE	VSD	<input type="checkbox"/> DELETE
NAME	CHIM, DANIEL	
STREET ADDRESS	16 PERDUE COURT	
CITY-ST-ZIP	MARKHAM, ONTARIO CANADA L3R -8T2	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-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 my address.

SIGNATURE:

CHIM

JANUARY 12, 1998

905-474-0710

CR2E034 (10/97)