

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000040025 (6)

1. Corporation Name

LIGHTNING ARENA, INC.



Principal Place of Business

Mailing Address

501 E. KENNEDY BLVD.
SUITE 1900
TAMPA FL 33602

501 E. KENNEDY BLVD.
SUITE 1900
TAMPA FL 33602

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 SUITE 1900
23 City & State
24 Zip
25 Country

26 Suite, Apt. #, etc.
27 SUITE 1900
28 City & State
29 Zip
30 Country

3. Date Incorporated or Qualified

05/26/1994

3a. Date of Last Report

05/23/1995

4. FEI Number

59-3247226

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLTON, FIELDS, ET AL.
ONE HARBOUR PLACE, 5TH FLOOR
TAMPA FL 33602

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 of agent (if applicable)

(NOTE: Registered Agent signature required when reappointing)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD
NAME OKUBO, TAKASHI
STREET ADDRESS 2-6-15 GINZA, CHUO-KU
CITY-STATE-ZIP TOKYO 104 JAPAN
☐ DELETE

1.1 TITLE ASD
1.2 NAME Phillips, Chris
1.3 STREET ADDRESS 501 E. Kennedy Blvd., Suite 175
1.4 CITY-STATE-ZIP Tampa FL
☒ Change ☐ Addition

TITLE D
NAME SUGIOKA, YOSHIYUKI
STREET ADDRESS 2-6-15 GINZA, CHUO-KU
CITY-STATE-ZIP TOKYO 104 JAPAN
☐ DELETE

2.1 TITLE D
2.2 NAME LeFevre, David E.
2.3 STREET ADDRESS 501 E. Kennedy Blvd., Suite 175
2.4 CITY-STATE-ZIP Tampa FL
☐ Change ☐ Addition

TITLE D
NAME NAKAMURA, YOSHIO
STREET ADDRESS 2-6-15 GINZA, CHUO-KU
CITY-STATE-ZIP TOKYO 104 JAPAN
☒ DELETE

3.1 TITLE D
3.2 NAME Smith, William Reece, Jr.
3.3 STREET ADDRESS One Harbour Place 5th Floor
3.4 CITY-STATE-ZIP Tampa, FL
☐ Change ☐ Addition

TITLE DPT
NAME OTO, SABURO
STREET ADDRESS 501 E. KENNEDY BLVD. #175
CITY-STATE-ZIP TAMPA FL 33602
☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE DS
NAME OKU, TADASHIGE
STREET ADDRESS 501 E. KENNEDY BLVD. #175
CITY-STATE-ZIP TAMPA FL 33602
☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
☐ Change ☐ Addition

TITLE D
NAME PHILLIPS, CHRIS
STREET ADDRESS 501 E. KENNEDY BLVD., SUITE 175
CITY-STATE-ZIP TAMPA FL 33602
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP
☐ Change ☐ Addition

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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frank M. SATO / CFO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (813) 276-7371
Date Daytime Phone

CR2E034 (12/95)