

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90060 036 ***150.00

0244240

DOCUMENT # P94000084235

1. Corporation Name
ABO (USA), INC.



Principal Place of Business
8373 LAKE DRIVE. #G-303
MIAMI FL 33166

Mailing Address
8373 LAKE DRIVE. #G-303
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

11/17/1994

4. FEI Number

65-0545160

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SAIGA, SHINTARO
615 SW 2ND AVE
MIAMI FL 33130

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

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 ☒ DELETE
NAME OGASAWARA, KAZUYOSHI
STREET ADDRESS 9761 SW 222ND STREET
CITY-ST-ZIP MIAMI FL 33190

TITLE VP ☐ DELETE
NAME SAIGA, SHINTARO
STREET ADDRESS 615 SW 2ND AVE
CITY-ST-ZIP MIAMI FL 33130

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME SAIGA, SHINTARO
1.3 STREET ADDRESS 615 SW 2nd Ave
1.4 CITY-ST-ZIP Miami, FL 33130

2.1 TITLE VP ☐ Change ☒ Addition
2.2 NAME Hideo Tominaga
2.3 STREET ADDRESS 1-13-12 Narimasu, Itabashi
2.4 CITY-ST-ZIP Tokyo Japan 175

3.1 TITLE VP ☐ Change ☒ Addition
3.2 NAME Tatsuhiko Yamamoto
3.3 STREET ADDRESS 1-13-12 Narimasu, Itabashi
3.4 CITY-ST-ZIP Tokyo - Japan

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shintaro Saiga

Date

4/30/99

Daytime Phone #

305-859-2010

CR2E034 (11/98)