FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Morthama Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P9500000101 (2) DOCUMENT # CLARESAN INTERNATIONAL, INC. Principal Place of Business Mailing Address -W-DARRY 6: DYRD W BARRY B. DYRD --4400 PGA-DLVD., BUITE-600 PALM-BEACH GARDENS-PL 33410 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 46 Thomas 26 98-0116400 Not Applicable 21 HIROKO NAKAMTO \$8.75 Additional 5. Certificate of Status Desired 340 Royal Fee Required 6. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution Added to Fees 23 Country This corporation owes or has paid the current year Intangible 0 25 USA 29 3-34 9. Name and Address of Current Registered Agent X Yes 33480 3.3480 □ No 24 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 Name BYRD: BARRY B 4400 PGA BLVD. 82 is Not Acceptable) SUITE-800 83 PALM-BEACH GARDENS FL-88410 Zip Code 84 City 33410 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, 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. Lam familiar with and accept the objections of Section 607.0505, Florida Statules. SIGNATURE (NOTE Registered Agent signature required whon reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Addition NAME NAKAMOTO, HIROKO 1.2 NAME 13769 PARC DRIVE STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33410 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 THYLE Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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

NAME

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an addr

CITY-ST-ZIP