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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	1998		Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
	MENT # P	95000034	363 (8))						
Principal Place of Business Mailing Address							- 1 FADIRDAR ARD NOTOL ARRESTALL ADVIN		, 1 111 187 1 1111	
1982 WESPO	OINTE CIRCLE		1992 WESTPOINTE CIRCLE ORLANDO FL 32835 US							
US	L 02003						DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified			
2. Principal F	Place of Business	2a. Ma	lling Address				05/02/1995 4. FEI Number		- I IA	pplied For
21		26				<u>.</u>	59-3386284	·····		ol Applicable
Suite, Apt.	. #, etc.	<u> </u>	Suite, Apt. #, otc.				5. Certificate of Status Desired			Additional equired
City & Stat	te		City & State				6. Election Campaign Financing			May Be
23		26					Trust Fund Contribution			to Fees
Zip	Country	h1		Cour	itry		8. This corporation owes or has p			
24	25 Name and Addres	29 29 ss of Current Registered	i Agent	30			Personal Property Tax due Jun 10. Name and Address of New R			No
TO	SUKADA, SATOSHI	or called the grown			B1 Name		10. Name and Address of New A	ogrator ou	Agent	
1982 WESTPOINTE CIRCLE ORLANDO FL 32835					B2 Street	Addra	ss (P.O. Box Number is Not Accepta	blal		
					52 Sileet	Addre	ss (r.o. dox number is not Accepta	tile)		
				[•	В3					
					B4 City	•			85 Zip	Code
11 Pursuant to the provisions of Sections 507 0502 and 507 1500. Florida Statutes the								FL	_	
office or i	registered agent, or both,	in the State of Florida. S	uch change was	es, the ab authorized	by the cor	n corpo rporatio	ration submits this statement for the n's board of directors. I hereby acco	purpose o ipt the api	of changing it pointment as	ts registered registered
SIGNATURE	am tamiliar with, and acce	prine obligations of, 500	FF , COCU. YOU HOUS	orida Statu	ies.					
		of registered agent and title if appl		t : Registered	Agent signatur	e requiso	when reinstaling)	DATE		
12. TITLE	Of Of	FICERS AND DIRECTOR	DELETE	13.		1	ADDITIONS/CHANGES TO OFFI	CERS AN		
NAME	TSUKADA, SATOS	:HI	L) bilitie	1.1 TITL 1.2 NAM					Change	Addition
STREET ADDRESS	1982 WESTPOINT				EET ADDRESS					
CITY-ST-ZIP	ORLANDO FL				r-ST-ZIP					
TITLE		A **	DELETE	2 1 1 ITL	E	1			Change	Addition
NAME				2.2 NAN	NE.					į
STREET ADDRESS					EET ADDRESS					
CITY-ST-ZIP TITLE			DELFTE	2. 4 CIT 3.1 TITL	Y·SI-ZIP	 			Change	Addition
NAME				3.2 NAN					CT Orlange	L_J Addition
STREET ADDRESS				i i	EET ADDRESS	1				
CITY-ST-ZIP				3.4. CH	Y-ST-ZIP					
TITLE			☐ DELETE	4 1 TITL	F				Change	Addition
NAME				4. 2 NA						
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP TITLE			DELETE	5.1 TiTL	- \$1 - ZIP	 			Change	Addition
NAME .				5.2 NAM					United	
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				5.4 CITY	- S1 - ZIP	<u> </u>				
TITLE			☐ DELETE	6.1 TITL					Change	Addition
NAME				6.2 NAM						
STREET ADDRESS I				E 62 STDI	PZRIGIDA 13	1				

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 redever 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 are an attachment with an address.

1/10 198 (407)290-8469

FILED

Jan 20 1998 8:00am

CITY+ST-ZIP