

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90296 014 ***150.00

DOCUMENT # P96000056963

1. Entity Name
YAMATO SUSHI, INC.



Principal Place of Business
10855 S.W. 72ND ST
#43
MIAMI FL 33173
US

Mailing Address
10855 S.W. 72ND ST
#43
MIAMI FL 33173
US

60006886



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0678620**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UENO, KAZUO
13265 S.W. 144 TERR
MIAMI FL 33186

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **UENO, KAZUO**
STREET ADDRESS **6601 SW 116 CT UNIT #308**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE ☒ Change ☐ Addition
NAME **13265 SW 144 Terr**
STREET ADDRESS **Miami FL 33186**
CITY-ST-ZIP

TITLE **VPD** ☐ Delete
NAME **UENO, YUMI**
STREET ADDRESS **15051 S.W. 103RD LN. APT# 4112**
CITY-ST-ZIP **MIAMI FL 33196**

TITLE ☒ Change ☐ Addition
NAME **13265 SW 144 Terr**
STREET ADDRESS **Miami FL 33186**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED Kazuo Ueno

1-11-03

Date

Daytime Phone #

CR2E034 (10/02)