200527 AV

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P96000066436

1. Entity Name

AZABU U.S.A., INC.



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90175 004 ***150.00

Principal Place of Business 5045 MISTY MORN ROAD PALM BEACH GARDENS FL 33418			5045	Mailing Address 5045 MISTY MORN ROAD PALM BEACH GARDENS FL 33418								
2. Principal F	Place of Busin	ess	3. Mai	3. Mailing Address					HAT volle v all			
Suite, Apt.	. #, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4. F	. FEI Number 65-0690143			pplied For ot Applicable	
Zip	Zip Country				Country	ntry 5.		Certificate of Status Desired	□ \$	8.75 Ad	ditional ed	
6. Name and Address of Current I				Registered Agent			7. Name and Address of New Registered Agent					
LIM, KWANG-SEONG 5045 MISTY MORN ROAD				ವಿನಿಷ್ಟ ವರ್ಷಗಳ <i>ದಿಕ್ಕ ಕುವಾ</i> ಟ ಡಾವಾರಗಳು ಚಿ			Street Address (P.O. Box Number is Not Acceptable)					
		NS FL 33418				City E Z						
									FŁ	Zip Cod	le	
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								Election Campaign Financ Trust Fund Contribution.	cing		00 May Be d to Fees	
10.		OFFICERS A	ND DIRECTO	D DIRECTORS 11.			ADI	DITIONS/CHANGES TO OFFICE	RS AND D	IRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IG-SEONG Y MORN OAD CH GARDENS FL 3	13418	☐ Delete	TITLE NAME STREET A CITY-ST				[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		er		☐ Delete	TITLE NAME STREET A			·	Ĺ	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. 4 . 4		Delete	TITLE NAME STREET A	- 1	÷ ••• -	ا يوند شو جوي ي		Change	. Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4 - MI V 1974		☐ Delete	TITLE NAME STREET A	ODRESS			С	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A CITY-ST-					_ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A CITY-ST					_ Change	Addition	

12. 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 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:

CR2E034 (10/02)