

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90062 024 ***158.75

DOCUMENT # P96000069501 1. Entity Name MASON VITAMINS, INC.					
Principal Place of Business 5101 N.W. 159TH STREET HIALEAH, FL 33014			Mailing Address 9990 SW 77 AVE STE 330 MIAMI, FL 33156-2699		
2. Principal Place of Business - No P.O. Box # 5105 NW 159th Street		3. Mailing Address 5105 NW 159th St.,			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Hialeah, FL		City & State Hialeah, FL		4. FEI Number 65-0723992	
Zip 33014		Country Miami-Dade		Applied For ☐ Not Applicable	
Zip 33014		Country Miami-Dade		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARGOLIS, JOHN A ESQUIRE SUITE 330 9990 S.W. 77TH AVENUE MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Kazuhiro Hoshi Street Address (P.O. Box Number is Not Acceptable) 5105 NW 159th St., City Hialeah FL Zip Code 33014	
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 Kazuhiro Hoshi 4/30/07 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, 2007 Fee will be \$550.00			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 NAME STREET ADDRESS CITY-ST-ZIP	CEO RODRIGUEZ, CARLOS 5105 N.E. 159TH STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman & Director Kazuhiro Hoshi 5105 NW 159th St., Hialeah, FL 33014	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RODRIGUEZ, JUANA D 5105 NW 159 STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Minoru Watanabe 5105 NW 159th St., Hialeah, FL 33014	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RODRIGUEZ, SONIA C 5105 NW-159 STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO, Secretary and Director Yosuke Hoshi 5105 NW 159th St., Hialeah, FL 33014	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, MICHELLE 5105 NW 159 STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ofelia Perez 5105 NW 159th St., Hialeah, FL 33014	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, CHRISTINE 5105 NW 159 STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary Pigott 5105 NW 159th St., Hialeah, FL 33014	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PEREZ, OFELIA 5105 NW 159 STREET HIALEAH, FL 33014	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Kazuhiro Hoshi 5105 NW 159th St., Hialeah, FL 33014	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Kazuhiro Hoshi 4/30/07 305-914-8402 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					