PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P 97000037193

1. Corporation Name

TOWA INTERNATIONAL, CORP

FILED May 13, 1999 8:00 am Secretary of State 05-13-1999 90047 033 ***150.00

Principal Place of Business Mailing Address									
780 N	W 42nd AVENUE #	617 780 NW	42ND	ΑV	ENUE				
1 / 2 2						DO NOT WRITE IN THIS SI	DACE		
#617						DO NOT WRITE IN THIS SPACE			
MIAMI FL. 33126 MIAMI FL					26	3. Date Incorporated or Qualifed			
2 Principal D	leas of Puniness	2a. Mailing Address				4 - 2 5 - 1 9 9 7 4. FEI Number	Π Δ	pplied For	
						65-0747883		lot Applicable	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				·				Additional	
22 27						5. Certifcate of Status Desired		Required	
City & State City & State						6. Election Campaign.Financing	\$5.00)-May Be	
23 28						Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	untry		8. This corporation owes the current year Intan-	gible		
24	25	29	30			Personal Property Tax.	x Yes	□No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Ag	jent		
YUNO T	AKAYAMA			81	Name				
		TUD #40/0		82	Street Add	ress (P.O. Box Number is Not Acceptable)			
1717 N	ORTH BAYSHORE DR	T A E # 1848		"	On oot Add	- Con the transfer to the transfer of			
MIAMI	FL 33132			83					
				84	City		85 Zip	Code	
ł				04	City	FL	65 Zip	Code	
agent. Nai SIGNATURE	m fan∕ililar with, and aco@alt the∥oʻbliga	Itions of, Section 607.050	5, Florida Stat	AC.	AYALHA	on's board of directors. I hereby accept the appointr	19		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	PRESIDENT	☐ DEFE.	TE 1.1 T	ITLE		[Change	Addition	
NAME	YOSHIHIKO TAKAY	AMA	1.2 N	AME					
STREET ADDRESS	1717 NORTH BAYS	HORE SRIVE	#18493s	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL. 3313	2	1.4 0	ITY-S1	r-ZIP				
TITLE	SECRETARY	☐ DELE	TE 2.1 T	ITLE		[Change	Addition	
NAME	YUNO TAKAYAMA		2.2 N	AME					
STREET ADDRESS	305 W 50TH STR	EET #19-D	2.3 S	TREET	ADDRESS				
CITY-ST-ZIP	NEW YORK NY. 10	019	2.40	CITY-S	T-ZIP				
TITLE	TREASURER	☐ DEFE.	TE 3.1 T	TLE		[Change	Addition	
NAME .	TAMAYU_TAKAYAMA		3.2 N	AME -					
STREET ADDRESS	305 W 50TH STR		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	NEW YORK NY 10	019	34 0	ITY-S	T-ZIP				
TITLE		☐ DELE.	.TE 4.1 T	ITLE		C	Change	☐ Addition	
NAME			4.21	IAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-ZIP				ITY-S1	r-ZIP				
TITLE		☐ DELE	H T				Change	Addition	
NAME			52 N	AME	-				
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP				ITY-S1	r-ZIP				
TITLE		☐ DELE	TE 6.1 T	ITLE			Change	☐ Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP			6.4 C	ITY-ST	r-ZIP				

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 receiver 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #