

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000044146

FILED
Feb 03, 2008
Secretary of State

Entity Name: SUSHI MASA JAPANESE RETAURANT, INC.

Current Principal Place of Business:

2200 WEST GLADES ROAD
#1201
BOCA RATON, FL 334317357 US

Current Mailing Address:

2200 WEST GLADES ROAD
#1201
BOCA RATON, FL 334317357 US

New Principal Place of Business:

2200 WEST GLADES ROAD
SUITE #1201
BOCA RATON, FL 334317357 US

New Mailing Address:

2200 WEST GLADES ROAD
SUITE #1201
BOCA RATON, FL 334317357 US

FEI Number: 65-0753213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVARESE PROFESSIONAL ACCOUNTING
2200 NORTH FEDERAL HIGHWAY
SUITE #201
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PHANITDASACK, LO
Address: 2200 W. GLADES ROAD, #1201
City-St-Zip: BOCA RATON, FL 33431 US

Title: VPD () Delete
Name: KRISANAYANYONG, SAICHOL
Address: 2200 W. GLADES ROAD, #1201
City-St-Zip: BOCA RATON, FL 33431 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PHANITDASACK, LO
Address: 2200 W. GLADES ROAD, SUITE #1201
City-St-Zip: BOCA RATON, FL 33431 US

Title: VPD (X) Change () Addition
Name: KRISANAYANYONG, SAICHOL
Address: 2200 W. GLADES ROAD, SUITE #1201
City-St-Zip: BOCA RATON, FL 33431 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LO PHANITDASACK

PD

02/03/2008

Electronic Signature of Signing Officer or Director

Date