## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** 

SIGNATURE:

Apr 21 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000082627 (5) DOCUMENT # SCG-MIYAIRI USA, INC. Principal Place of Business Mailing Address 8004 SOUTHWEST 198 TERRACE **8004 SOUTHWEST 198 TERRACE** MIAMI FL 33189 MIAMI FL 33189 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/24/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zıp Country Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AMERILAWYER CHARTERED gavier Williams 343 ALMERIA AVENUE 82 Street A CORAL GABLES FL 33134 83 MIAMI 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and ancept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent algorature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE 1.1 TITLE TANADUMRONGSAK, YUNYONGCHAI 1.2 NAME NAME 8004 SOUTHWEST 198 TERRACE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33189** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TANADUMRONGSAK, NATTINEE NAME 2.2 NAME 8004 SOUTHWEST 198 TERRACE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33189 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 31 TITLE WILLIAMS, XAVIER NAME 32 NAME 8004 SOUTHWEST 198 TERRACE STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33189** 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TAECHAPICHANUN, NARIAN 4. 2 NAME 8004 SOUTHWEST 198 TERRACE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33189 CITY-ST-ZIE 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 DILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-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 suppliemental annual report is true and accurate and that my signature shall have the same legal affect 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 appear with an address.

SIGNATURE:

XAVIETE WILLIAMS

RES A 95 (305) 255 1005

FLORIDA DEPARTMENT OF STATE

**FILED**