2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

SIGNATURE:

Secretary of State DOCUMENT # P98000023777 01-12-2005 90012 036 ***163.75 **NEWLONG LATIN AMERICA, INC.** Principal Place of Business Mailing Address 8545 NW 72TH ST. 8545 NW 72TH ST. 40000601 MIAMI, FL 33166 MIAMI, FL 33166 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 01072005 Cha-P CB2E034 (10/03) Applied For City & State City & State 4. FEI Number 65-0821394 Not Applicable Zip Country Country _ \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YOKOMORI, MASAAKI Street Address (P.O. Box Number is Not Acceptable) 12410 S W 105 TERRACE MIAMI, FL 33185 Zip Code 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE TITLE Change ■ Addition KONDO, YASUHIRO NAME NAME STREET ADDRESS 14-14 MATSUGAYA 1 - CHOME STREET ADDRESS TAITO-KU, TOKYO 111-0036 JAPAN CITY-ST-ZIP TAITO-KU TOKYO 110 JAPAN, CITY-ST-ZIP VPD TITLE ☐ Delete TITLE VPD Change ☐ Addition KATO, MASAMI SAKURAI YUJI NAME NAME 14-14 MATSUGAYA 1-CHOME STREET ADDRESS 14-14 MATSUGAYA 1-CHOME STREET ADDRESS TAITO-KU TOKYO 110 JAPAN, CITY-ST-ZIP TAITO-KU, TOKYO 111-0036 JAPAN CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ■ Addition YOKOMORI, MASAAKI NAME NAME STREET ADDRESS 12410 S.W. 106 TERRACE STREET ADDRESS CITY-ST-7IP MIAMI, FL 33186 CITY-ST-7P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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

MASAAKI YOKOMORI

JAN, 07, 2005

305-406-1038

Daytrne Phone #

FILED Jan 12, 2005 8:00 am