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

**PROFIT** CORPORATION ANNUAL REPORT

1999

**DOCUMENT #** 

1. Corporation Name



P98000075413

FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 21, 1999 8:00 am Secretary of State Katherine Harris

04-21-1999 90148 049 \*\*\*150.00

NANYO USA, INC.					
					E NORMANIA NIR KRIEB REKKI BONKE BOKKI OCH I COMIL KOFRA RIKKI DI COL KIČŽI IKKI I
Principal Place	of Business	Mailing Address			
7701 CLEMENTINE WAY ORLANDO FL 32819  7701 CLEMENTINE WAY ORLANDO FL 32819					
ORLANDO FL 32819 ORLANDO FL 32819				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed
					08/28/1998
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			X Not Applica
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State	e - ·	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	iuy	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
24	9. Name and Address of Current		0		10. Name and Address of New Registered Agent
	3. Name and Address of Current	Linglistored Wilelit	1	81 Name	JUKIKO MOGUCHI
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE		L	l l		
				82 Street	at Address (P.O. Box Number is Not Acceptable)
SUIT	E 3000		) <del>,</del>	83	
MIA	VII FL 33131		L		
			'	City 2	ORLANDO FL  85 32899
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the ab	ove pamed	d corporation submits this statement for the numose of changing its registers
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was auf	nonzea .	ny tna com-	poration's board of directors. I hereby accept the appointment as registered
		-211 Chi	in Otata		× 4/19/99
SIGNATURE	Signature, typed or printed name of registered agent	Lajo title if applicable. (NOTE: R	legistered A	Agent signature i	e required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 T/TL	E.	☐ Change · ☐ Add
NAME	NOGUCHI, YUKIKO		1.2 NAM	Æ	
STREET ADDRESS	7701 CLEMENTINE WAY		1.3 STR	LEET ADDRESS	s
CITY-ST-ZIP	ORLANDO FL 32819		1	Y-ST-ZIP	☐ Change ☐ Ado
TITLE	D	☐ DELETE	2.1 TITL		☐ Change ☐ Add
NAME	HORINOUCHI, YUKIHIKO		2.2 NAN		
STREET ADDRESS	4-7-2 KYODO	***		REET ADDRESS	S
CITY-ST-ZIP	SETAGAYA-KU, TOYOKO, JAPA	N □ DELETE	2. 4 CIT	Y-ST-ZIP	☐ Change ☐ Add
TITLE	D				- Consign - Cons
NAME	Kodama, Takahiro   3-7-10 Wakanoura minami -	WAKAVAMA CUI	3.2 NAM		
STREET ADDRESS	*	- NAWA I WWA-ONI		REET ADORESS	8
			a a A i IT	Y-ST-ZIP	
CITY-ST-ZIP	WAKAYAMA-KEN JAPAN	□ NFIETE		F	☐ Change ☐ Ado
TITLE	D	☐ DELETE	4.1 TITL		☐ Change ☐ Add
TITLE NAME	D KITABATA, TATSUYA	<del></del>	4.1 TITL 4.2 NAI	ME	
TITLE  NAME  STREET ADDRESS	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	<del></del>	4.1 TITL 4.2 NAI 4.3 STR	ME REET ADDRESS	
TITLE  NAME , STREET ADDRESS CITY- ST-ZIP	D KITABATA, TATSUYA	<del></del>	4.1 TITL 4.2 NAI 4.3 STR	ME REET ADDRESS Y-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	WAKAYAMA-SHI	4.1 TITL 4. 2 NAI 4.3 STR 4.4 CIT	ME REET ADDRESS Y-ST-ZIP LE	s
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	WAKAYAMA-SHI	4.1 TITL 4. 2 NAI 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAA	ME REET ADDRESS Y-ST-ZIP LE	S Change Add
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	WAKAYAMA-SHI	4.1 TITL 4.2 NAI 4.3 STR 4.4 CITO 5.1 TITL 5.2 NAI 5.3 STR	ME REET ADDRESS Y-ST-ZIP LE ME	S Change Add
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	WAKAYAMA-SHI	4.1 TITL 4.2 NAI 4.3 STR 4.4 CITO 5.1 TITL 5.2 NAI 5.3 STR	ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	S Change Add
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	D KITABATA, TATSUYA 3-7-127 WAKANOURA MINAMI	WAKAYAMA-SHI	4.1 TITL 4.2 NAI 4.3 STR 4.4 CITI 5.1 TITL 5.2 NAI 5.3 STR 5.4 CITI 6.1 TITL 6.2 NAI	ME REET ADDRESS Y-ST-ZIP LE AE REET ADDRESS Y-ST-ZIP LE	S Change Add

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: