## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S04024 (3)MORITA SPECIAL SEWING MACHINE, CORP. Principal Place of Business Mailing Address 5406 NORTHWEST 72ND AVENUE 5406 NORTHWEST 72ND AVENUE MIAMI FL 33166 MIAMI FL 33166 3. Date Incorporated or Qualified 3a. Date of Last Report 10/01/1990 02/10/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0327898 Not Applicable Suite, Apt, #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zφ Country Country Ζıρ 8. This corporation has liability for intangible tax under s 199.032, 25 29 30 Florida Statutes ☐ Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KING, MENG HO Street Address (P.O. Box Number is Not Acceptable) 5406 NORTHWEST 72ND AVENUE 83 MIAM! FL 33166 84 City Zio Code 85 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 accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1. 1 TITLE Change Addition

SIGNATURE CR2E034 (12/95) 12 TITLE NAME KING, MENG HO 1.2 NAME STREET ADDRESS 5406 NORTHWEST 72ND AVE. 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIE 1.4 CITY-ST-ZIP ☐ DELETE TITLE 2 1 TITLE ☐ Change Addition KING, SIN MAN NAME 2.2 NAME 5406 NORTHWEST 72ND AVE. STREET ADDRESS 23 STREET ADDRESS MIAMI FL CITY - ST - ZIP 24 CITY-ST-ZIP DELETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - ST - ZIP 34 CITY - ST-ZIP DELETE TIFLE Change 4 1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 4.4 CITY-ST-ZIP DELETE THILE Change 5.1 TiTLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6. 1 THTLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - 7IP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an attachment with an address.

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SIGNING OFFICER OR DIRECTOR