

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90050 008 ***158.75

DOCUMENT # S34190

1. Entity Name

ISEYA ORIENTAL MARKET, INC.



Principal Place of Business

5623 S.W. 107TH AVE.
MIAMI FL 33173

Mailing Address

12480 SW 125TH TERR
MIAMI FL 33186

2. Principal Place of Business - No P.O. Box #

12480 S.W. 125th Terr.

3. Mailing Address

Same as Above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip 33186

Country U.S.A.

Zip

Country

4. FEI Number 65-0251879

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NAKABAYASHI, ETSUKO
5623 SW 107 AVE
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name NAKABAYASHI, ETSUKO
Street Address (P.O. Box Number is Not Acceptable)
12480 S.W. 125th Terr.
City MIAMI FL Zip Code 33186

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 *Etsuko Nakabayashi* ETSUKO NAKABAYASHI V-P/P

DATE 4-6-2007

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> Delete
NAME	NAKABAYASHI, ETSUKO	
STREET ADDRESS	5623 SW 107 AVE	
CITY - ST - ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/V P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ETSUKO NAKABAYASHI	
STREET ADDRESS	12480 S.W. 125th Terr.	
CITY - ST - ZIP	MIAMI, FL 33186	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, without other like empowered.

SIGNATURE: *Etsuko Nakabayashi* ETSUKO NAKABAYASHI 4-6-2007 (305) 582-3407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Caro

Daytime Phone #