

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S37461

FILED  
Jan 09, 2010  
Secretary of State

**Entity Name:** PASTURE PRIME WAGYU, INC.

**Current Principal Place of Business:**

4141 SE 180TH ST  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

**Current Mailing Address:**

13639 N E 13TH  
OXFORD, FL 34484

**New Mailing Address:**

**FEI Number:** 59-3056731

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIVERSON, TORM  
13639 N E 13TH  
OXFORD, FL 34484 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: S  
Name: SIVERSON, MARILYN A  
Address: 391 SANTA MARIA AVE.  
City-St-Zip: SAN LUIS OBISPL, CA 93405

Title: P  
Name: SIVERSON, NELS H  
Address: 391 SANTA MARIA AVE.  
City-St-Zip: SAN LUIS OBISPO, CA 93405

Title: VP  
Name: SIVERSON, TORMOD N.  
Address: 13639 N.E. 13TH  
City-St-Zip: OXFORD, FL 34484

Title: T  
Name: LAURI SIVERSON  
Address: 13639 N.E. 13TH  
City-St-Zip: OXFORD, FL 34484

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARILYN SIVERSON

S

01/09/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date