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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V61652

(6)

ISSEL HOUSING INC.

FILED								
Mar 24 1998 8:00am								
Secretary of State								

Principal Place	of Business	Mailing Address				IEH BIEN BIEN GIRN BIEN	
7337 N.W. 37							
7337 N.W. 37TH AVE. 22 MIAMI FL 33147 7337 N.W. 37TH AVENUI			:				
US MIAMI FL 33147					DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualified		
		1 - 1/2 1/2 -			09/03/1992		
<u> </u>	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21 1393	5 NW 19th AVE	26 13935 NW Suite, Apt. #, etc.	<u>19th AV</u>	E	65-0354062	¢0.75	t Applicable
	#, etc.	· ·			6. Certificate of Status Desired	Fee Re	
City & State		City & State			Election Campaign Financing	\$5.00	
⊢ '		├ ─┐ '	TOT		Trust Fund Contribution	35.00 ☐ Added t	
23 OPA-1	LOCKA FL Country	28 OPA-LOCKA	Country		8. This corporation owes or has paid		
24 33054	<u> </u>	33054	30 US		Personal Property Tax due June 30] No
24 3303	9. Name and Address of Current				10. Name and Address of New Regis	itered Agent	
ко	USAKU, MEAHATA		81 Na	me			
170	82 Str	oot Addre	ess (P.O. Box Number is Not Acceptable)				
l Ñ.	02 311	set Addie	ess (1 ,O. Dox Married 18 Not Nocopiable)				
			83				
			94 63			es Zin (Code
			84 Cit	y		FL 85 Zip C	2006
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-nar	ned corp	oration submits this statement for the pur on's board of directors. I hereby accept t	pose of changing It	s registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was a ions of Section 607.0505. Flo	authorized by the orida Statutes	corporati	on's board of directors. I hereby accept t	ne appointment as	registered
l "	The state of the s						
SIGNATURE	Signature, typicid or printed name of registered agent	and little if applicable (NOTE	E Registered Agent sign	ature require		DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	Р	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	MASATOSHI, SATO		1.2 NAME				
STREET ADDRESS	12410 NE 11TH PL		1.3 STREET ADDR	SS			1
CITY-ST-ZIP	N. MIAMI FL		1.4 CITY - ST - ZIP		<u> </u>		
TITLE	VP	☐ DELE te	2.1 TITLE	VI	2	Change	Addition
NAME	HIDEO, KITAHARA		2.2 NAME	H	IDEO KITAHARA		
STREET ADDRESS	7337 NW 37TH AVE.		2.3 STREET ADDR	SS 13	3935 NW 19th AVE		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		PA-LOCKA FL-33054		-11448
TITLE	ST	☐ DELE te	3.1 TITLE	ļ		∐ Change	☐ Addition
NAME	KOUSAKU, MEAHATA		3.2 NAME				
STREET ADDRESS	17021 N. BAY ROAD, UNIT 4-	105	3.3 STREET ADDR	SS			
CITY-ST-ZIP	N. MIAMI BCH FL		3.4. CITY-ST-ZIP				The stances
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR	SS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP				1 4485
TITLE		☐ DELETE	5.1 TITLE			L. Change	☐ Addition
NAME			5.2 NAME	- 1			
STREET ADDRESS			5.3 STREET ADDR	SS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				4480
TITLE		☐ DELETE	6.1 TITLE			L Change	Addition
NAME			6.2 NAME	ł			
STREET ADDRESS			6.3 STREET ADDR	SS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP				(24
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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 roceiver 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.

LOURANU MARHA

3/11/00 205-06-2-2604