2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002139

Entity Name: DEVELOPMENT VENTURES GROUP, INC.

Current Principal Place of Business:

3550 LENOX RD NE SUITE 1850

ATLANTA, GA 30326

Current Mailing Address:

3550 LENOX RD NE SUITE 1850 ATLANTA, GA 30326 US

FEI Number: 13-3588800 Certificate of Status Desired: No

FILED Apr 22, 2021

Secretary of State

2485687827CC

Date

Date

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

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: STEPHANIE MILNES 04/22/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

City-State-Zip:

Title DIRECTOR, CHAIRMAN Title DIRECTOR, CFO

UCHIDA, MICHIYA KANAIZUMI, RYUICHIRO Name Name

Address 3550 LENOX RD NE Address 3550 LENOX RD NE

SUITE 1850 SUITE 1850

City-State-Zip: ATLANTA GA 30326 City-State-Zip: ATLANTA GA 30326

Title PRESIDENT, DIRECTOR, CEO Title DIRECTOR, SECRETARY, SENIOR VP

Name BIGGS, DENNIS Name RYLEE, ROBERT

350 5TH AVENUE SUITE 5340 3550 LENOX RD NE Address Address

SUITE 1850 NEW YORK NY 10118 City-State-Zip:

City-State-Zip: ATLANTA GA 30326

Title **TREASURER** Title

ATLANTA GA 30326

above, or on an attachment with all other like empowered.

KAWAHITO, KAZUOMI Name Name TAKIZAWA, YASUTO 3550 LENOX RD NE Address

Address 3550 LENOX RD NE **SUITE 1850**

ASST. SECRETARY

ATLANTA GA 30326

SUITE 1850 ATLANTA GA 30326

City-State-Zip: ATLANTA GA 30326

Title DIRECTOR Title **DIRECTOR**

Name IIZAWA, HIROAKI Name MACARTHUR, WILLIAM

3550 LENOX RD NE Address 3550 LENOX RD NE SUITE 1850 Address

SUITE 1850

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

City-State-Zip:

04/22/2021 SIGNATURE: ROBERT RYLEE SECRETARY

Electronic Signature of Signing Officer/Director Detail