

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08922

Entity Name: NNR GLOBAL LOGISTICS USA INC.**Current Principal Place of Business:**10400 NW 21ST STREET
SUITE 115
DORAL, FL 33172**Current Mailing Address:**450 EAST DEVON
SUITE 260
ITASCA, IL 60143 US**FEI Number:** 36-2719768**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR, SECRETARY
Name	UTAKA, KEIICHI
Address	450 EAST DEVON SUITE 260
City-State-Zip:	ITASCA IL 60143

Title	DIRECTOR
Name	SHINJI, KITAMURA
Address	ITSUI 2ND ANNEX,4-20 NIHONBASHIHONGOKUCHO
City-State-Zip:	4-CHOME, CHUO-KU, TOYKO 103-0-021

Title	DIRECTOR
Name	DOSANJH, RAVI
Address	450 EAST DEVON SUITE 260
City-State-Zip:	ITASCA IL 60143

Title	DIRECTOR
Name	GOTOH, MASAHICO
Address	ITSUI 2ND ANNEX,4-20 NIHONBASHIHONGOKUCHO
City-State-Zip:	4-CHOME, CHUO-KU, TOYKO 103-0-021

Title	TREASURER
Name	ARAKI, TOHRU
Address	450 E DEVON AVE., SUITE 260
City-State-Zip:	ITASCA IL 60143

Title	DIRECTOR
Name	MCDONALD, JEFFREY
Address	450 EAST DEVON SUITE 260
City-State-Zip:	ITASCA IL 60143

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: KEIICHI UTAKA**PRESIDENT****05/26/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date