

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002890

1. Entity Name

HANKYU INTERNATIONAL TRANSPORT (USA), INC.

**FILED**  
**Feb 23, 2000 8:00 am**  
**Secretary of State**

02-23-2000 90001 020 \*\*\*150.00

Principal Place of Business

Mailing Address

5353 W IMPERIAL HWY  
100  
LOS ANGELES CA 90045  
US

5353 W IMPERIAL HWY  
100  
LOS ANGELES CA 90045-6266  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

95-2668593

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KANEKO, NORI  
875 BAYSIDE LANE  
FT. LAUDERDALE FL 33326

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PDC	<input checked="" type="checkbox"/> Delete
NAME	YAGI, TAKAAKI	
STREET ADDRESS	2941 CAROLWOOD LN	
CITY-ST-ZIP	TORRANCE CA 90505	
TITLE	V	<input type="checkbox"/> Delete
NAME	ICHIMARU, YOSHINOBU	
STREET ADDRESS	17A LINWOOD RD	
CITY-ST-ZIP	PORT WASHINGTON NY 11050	
TITLE	TS	<input type="checkbox"/> Delete
NAME	TANABE, HIROTSUHI	
STREET ADDRESS	5307 BAYRIDGE RD	
CITY-ST-ZIP	RANCHO PALOS VERDES CA 90275	
TITLE	V	<input type="checkbox"/> Delete
NAME	ROCKOVE, ALFRED	
STREET ADDRESS	651 VANDERBILT ST	
CITY-ST-ZIP	BROOKLYN NY 90803	
TITLE	V	<input type="checkbox"/> Delete
NAME	DUGAN, MICHAEL	
STREET ADDRESS	5639 SORRENTO DR	
CITY-ST-ZIP	LONG BCH FL 90803	
TITLE	V	<input type="checkbox"/> Delete
NAME	MOSS, KURT	
STREET ADDRESS	657 PACKARD DR	
CITY-ST-ZIP	ELGIN FL 60120	

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOSHINOBU ICHIMARU	
STREET ADDRESS	1923 SELBY #304 LOS ANGELES CA 90025	
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		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HIROTSUHI TANABE

Date

1/25/00

Daytime Phone #

310-258-9410

CR2E034 (9/99)