

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90361 011 ***150.00

0648503 AT

DOCUMENT # P18999

1. Entity Name
NACHI AMERICA INC.



Principal Place of Business
**5022 W. 79 ST
INDIANAPOLIS IN 46268**

Mailing Address
**5022 W. 79 ST
INDIANAPOLIS IN 46268**

11000000



2. Principal Place of Business

3. Mailing Address

17500 Twenty Three Mile **17500 Twenty Three Mile**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

13-1968862

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

~~THE PRENTICE-HALL CORPORATION SYSTEM INC.~~
**1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCEO
ITO, SHOHEI
180 GOVERNORS LANE
ZIONSVILLE IN 46077** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
NAKASHIMA, HIDEHIRO
12847 FLEETWOOD DR
CARMEL IN 46032** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SUGIURA, TOSHIO
5022 W. 79TH STREET
INDIANAPOLIS IN 46268** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**NISHIKI SETO
5022 West 79th
Indianapolis IN 46268** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
NAKAMURA, HIDEO
1501 E CENTRAL RD #131
ARLINGTON HEIGHTS IL 60005** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
KUMAKI, YASUHIRO
5022 W. 79 ST
INDIANAPOLIS IN 46268** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Masafumi MINAMI
1666 Lodgetree Cove
Indianapolis IN 46280** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
KANEKO, ZENSHIRO
16 MARY LANE
WALDWICK NJ 07463** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 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

Date

Daytime Phone #

CR2E034 (10/02)