## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F09000000638

Entity Name: HAPPY SCIENCE USA, INC.

FILED Apr 29, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

725 RIVER ROAD SUTIE 58 725 RIVER ROAD SUITE 58 EDGEWATER, NJ 07024 EDGEWATER, NJ 07024

Current Mailing Address: New Mailing Address:

79 FRANKLIN STREET NEW YORK, NY 10013

FEI Number: 52-1843651 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SATO, TETSUYA 618 TUSCANNY STREET BRANDON, FL 33511 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

## **OFFICERS AND DIRECTORS:**

Title: CP

Name: ICHIKAWA, KAZUHIRO

Address: EBARA 2-9-8, APT 702, SHINAGAWA City-St-Zip: TOKYO, JAPAN, TO 142-0063 JP

Title: \

 Name:
 OIKAWA, YUKIHISA

 Address:
 120 RIVERSIDE BLVD., #12W

 City-St-Zip:
 NEW YORK, NY 10069 US

Title:

Name: NAKADA, ROBERT

Address: 880 MERIDIAN BAY LANE, UNIT316 City-St-Zip: FOSTER CITY, CA 94404 US

Title:

Name: SUNADA, HIRONOBU
Address: 3180 PACIFIC HEIGHTS R D
City-St-Zip: HONOLULU, HI 96813 US

Title:

 Name:
 HOSHINO, KEIKO

 Address:
 1590 E DEL MAR BLVD

 City-St-Zip:
 PADADENA, CA 91105 US

Title: S

 Name:
 NAKAHARA, YUMIKO

 Address:
 500 E77TH STREET, APT224

 City-St-Zip:
 NEW YORK, NY 10062 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YUMIKO NAKAHARA S 04/29/2010