

**UNIFORM COMMERCIAL CODE—FINANCING STATEMENT —FORM UCC-1**  
**IMPORTANT—Read instructions on back before filling out form**

This **FINANCING STATEMENT** is presented for filing pursuant to the Nevada Uniform Commercial Code

1. DEBTOR (LAST NAME FIRST) <b>Doueas, Machiko</b>		1A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>1646</b>	
1B. MAILING ADDRESS <b>P. O. Box 6894</b>		1C. CITY, STATE <b>Stateline, NV</b>	
1E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 1B)		1F. CITY, STATE	
1D. ZIP CODE <b>89449</b>		1G. ZIP CODE	
2. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS		2C. CITY, STATE	
2E. RESIDENCE ADDRESS (IF AN INDIVIDUAL AND DIFFERENT THAN 2B)		2F. CITY, STATE	
2D. ZIP CODE		2G. ZIP CODE	
3. DEBTOR(S) TRADE NAME OR STYLE (IF ANY) <b>Fudo Bijutsu LTD.</b>		3A. FEDERAL TAX NO. <b>1646</b>	
4. ADDRESS OF DEBTOR(S) CHIEF PLACE OF BUSINESS (IF ANY)		4A. CITY, STATE	
		4B. ZIP CODE	
5. SECURED PARTY NAME <b>First Interstate Bank of Nevada, N.A. Dept. 754</b>		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. <b>1212-00019</b>	
MAILING ADDRESS <b>P.O. Box 98588</b>			
CITY <b>Las Vegas</b> STATE <b>Nevada</b> ZIP CODE <b>89193-8588</b>			
6. ASSIGNEE OF SECURED PARTY (IF ANY)		6A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME			
MAILING ADDRESS			
CITY		STATE	
		ZIP CODE	

7. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property on which growing or to be grown and name of record owner of such real estate, if fixtures, include description of real property to which affixed or to be affixed and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which to be extracted. All accounts and general intangibles now existing or hereafter arising; and all inventory now or hereafter owned or held; and all of the interest of the debtor in goods from the sale of which the account arose.

7A. \_\_\_\_\_ SIGNATURE OF RECORD OWNER  
 7B. \_\_\_\_\_ (TYPE) RECORD OWNER OF REAL PROPERTY  
 7C. \$ \_\_\_\_\_ MAXIMUM AMOUNT OF INDEBTEDNESS TO BE SECURED AT ANY ONE TIME (OPTIONAL)

8. Check if <input checked="" type="checkbox"/> Applicable	A <input checked="" type="checkbox"/> Proceeds of collateral are also covered	B <input checked="" type="checkbox"/> Products of collateral are also covered	C <input type="checkbox"/> Proceeds of above described original collateral in which a security interest was perfected	D <input type="checkbox"/> Collateral was brought into this State subject to security interest in another jurisdiction
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9. Check if  Applicable  DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403

10. (Date) DECEMBER 11 19 90

By: *Machiko Doueas* SIGNATURE(S) OF DEBTOR(S) Machiko Doueas (TITLE)  
First Interstate Bank of Nevada, N.A.

By: *Craig Schorr* SIGNATURE(S) OF SECURED PARTY(IES) Retail Relations Off (TITLE)  
Craig Schorr

11. Return Copy to  
 NAME First Interstate Bank of Nevada, N.A.  
 ADDRESS Department 754  
 CITY, STATE AND ZIP P.O. Box 98588  
Las Vegas, Nevada 89193-8588

12. This Space for Use of Filing Officer  
 (Date, Time, File Number and Filing Officer)

**07203**

REQUESTED BY  
FIB  
 IN OFFICIAL RECORDS OF  
 DOUGLAS CO., NEVADA

**'90 DEC 14 A10:55**

SUZANNE BEAUDREAU  
 RECORDER **241026**

\$16<sup>00</sup> PAID K12 DEPUTY FILING FEE  
 SEE INSTRUCTIONS

**BOOK 1290 PAGE 1766**

THIS SPACE FOR USE OF FILING OFFICER