

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 850857 (4)

1. Corporation Name
SUMITOMO CORPORATION OF AMERICA

Principal Place of Business

345 PARK AVE
NEW YORK NY 10154-0002

Mailing Address

345 PARK AVE
NEW YORK NY 10154-0004

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

10/29/1981

3a. Date of Last Report

02/29/1996

4. FEI Number

13-5612163

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME IWASAKI, TSUNEO
STREET ADDRESS 880 UNITED NATIONS PLAZA
CITY-ST-ZIP NEW YORK NY

TITLE DVS ☒ DELETE

NAME SASAYAMA, HISAO
STREET ADDRESS 200 E. 61ST STREET
CITY-ST-ZIP NEW YORK NY

TITLE V ☐ DELETE

NAME EISENBERG, BARRY
STREET ADDRESS 1 BAKER ROAD
CITY-ST-ZIP LIVINGSTON NJ

TITLE V ☐ DELETE

NAME HANLEY, LAURENE M
STREET ADDRESS 1 RECTORY LN
CITY-ST-ZIP SCARSDALE NY

TITLE AS ☐ DELETE

NAME SHIBUYA, TOSHIFUMI
STREET ADDRESS 40 RIDGELY STREET
CITY-ST-ZIP DARIEN CT

TITLE DVT ☐ DELETE

NAME ADACHI, TAKEHIKO
STREET ADDRESS 238 E. 47TH STREET, #25C
CITY-ST-ZIP NEW YORK NY 10017

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DP ☒ Change ☐ Addition

12 NAME Keitaro Yokohata
13 STREET ADDRESS 860 United National Plaza
14 CITY-ST-ZIP New York, N.Y. 10017

21 TITLE DVS ☒ Change ☐ Addition

22 NAME Izumi Shimojima
23 STREET ADDRESS 248 Treetop Lane
24 CITY-ST-ZIP Ryebrook, NY 10573

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE T. Shibusawa 5-26-97 212 207 0464

FILED
Jun 05 1997 8:00am
Secretary of State



CR2E034 (9/96)