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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 850857 (4)

SUMITOMO CORPORATION OF AMERICA

Principal Place of Business	Mailing Address .	
345 PARK AVE NEW YORK NY 10154-0002	345 PARK AVE NEW YORK NY 10154-0002	

## **FILED** Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/29/1981 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 13-5612163 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City 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 reinstating) OFFICERS AND DIRECTORS 72E034 (10/97 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE \_\_\_ Change Addition YOKOHATA, KEITARO NAME 1.2 NAME 860 UNITED NATIONS PLAZA STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE SHIMOJIMA, IZUMI 2.2 NAME NAME 248 TREETOP LANE STREET ADDRESS 2.3 STREET ADDRESS RYEBROOK NY CiTY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE NAME EISENBERG, BARRY 1 BAKER ROAD 3.3 STREET ADDRESS STREET ADDRESS LIVINGSTON NJ 3.4. CITY - ST - ZIP CITY-SI-ZIP DELETE ☐ Addition 4.1 TITLE Change TITLE HANLEY, LAURENE M 4. 2 NAME NAME 1 RECTORY LN 4.3 STREET ADDRESS STREET ADDRESS SCARSDALE NY 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE SHIBUYA, TOSHIFUMI NAME 5.2 NAME **40 RIDGELY STREET** STREET ADDRESS 5.3 STREET ADDRESS DARIEN CT 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE ADACHI, TAKEHIKO NAME 6.2 NAME 236 E. 47TH STREET, #25C 6.3 STREET ADDRESS STREET ADORESS

14. 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 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:

\*\*ToshIfumi\*\* Secretary\*\*

1-12-98

6.4 CITY-ST-ZIP

SIGNATURE:

NEW YORK NY 10017