


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 03, 2005 8:00 am**  
**Secretary of State**

05-03-2005 90141 002 \*\*\*150.00

**DOCUMENT # F01000006215**

1. Entity Name  
 NEC FINANCIAL SERVICES, INC.



Principal Place of Business  
 300 FRANK W. BURR BLVD.  
 TEANECK, NJ 07666

Mailing Address  
 8 CORPORATE CENTER DR.  
 MELVILLE, NY 11747

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.



02102005 Chg-P CR2E034 (10/03)

City & State  
 Zip Country

4. FEI Number  
 13-3224311

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

**7. Name and Address of New Registered Agent**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

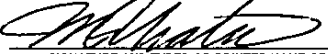
**10. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> Delete
NAME	OKUYAMA, HIROFUMI	
STREET ADDRESS	101 EAST 52ND ST., 5TH FLR.	
CITY-ST-ZIP	NEW YORK, NY 10022	
TITLE	S	<input type="checkbox"/> Delete
NAME	YAMADA, TAKAYUKI	
STREET ADDRESS	300 FRANK W. BURR BLVD.	
CITY-ST-ZIP	TEANECK, NJ 07666	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	TADA, JUN	
STREET ADDRESS	300 FRANK W. BURR BLVD.	
CITY-ST-ZIP	TEANECK, NJ 07666	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KATO, TOMOYUKI	
STREET ADDRESS	7-1, SHIBA 5-CHOME, MINATO-KU	
CITY-ST-ZIP	TOKYO, JAPAN 108-8001,	
TITLE	D	<input type="checkbox"/> Delete
NAME	MATSUYAMA, SOICHIRO	
STREET ADDRESS	7-1, SHIBA 5-CHOME, MINATO-KU	
CITY-ST-ZIP	TOKYO, JAPAN 108-8001,	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Masahiro Urata	
STREET ADDRESS	300 Frank W. Burr Blvd.	
CITY-ST-ZIP	Teaneck, NJ 07666	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	101 East 52nd St.	
CITY-ST-ZIP	New York, NY 10022	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Takao Ono	
STREET ADDRESS	7-1 Shiba, 5-chome, Minato-ku	
CITY-ST-ZIP	Tokyo 108-0001, Japan	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Masahiro Urata 4/14/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #