

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PM 4: 34

DOCUMENT # **F94000002212 (8)**

1. Corporation Name
MC MACHINERY SYSTEMS, INC.

Principal Place of Business
**1500 MICHAEL DR.
WOOD DALE IL 60191**

Mailing Address
**1500 MICHAEL DR.
WOOD DALE IL 60191**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/29/1994

3a. Date of Last Report

2. Principal Place of Business

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2a. Mailing Address
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One E. Wacker Drive
Suite, Apt. #, etc.
Suite 3200
City & State
Chicago, Illinois
Zip
60601

4. FEI Number
36-3766742

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

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code

FL

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 the applicable date)
NOTE: Registered Agent signature required when changing (DATE)

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	OKAWA, HIDEO
STREET ADDRESS	1500 MICHAEL DR.
CITY - ST - ZIP	WOOD DALE IL 60191
TITLE	V
NAME	INOUE, KIYOHIDE
STREET ADDRESS	1500 MICHAEL DR.
CITY - ST - ZIP	WOOD DALE IL 60191
TITLE	V
NAME	YOSHIOKA, SHIRO
STREET ADDRESS	1500 MICHAEL DR.
CITY - ST - ZIP	WOOD DALE IL 60191
TITLE	TS
NAME	YAMAGUCHI, NORIO
STREET ADDRESS	1500 MICHAEL DR.
CITY - ST - ZIP	WOOD DALE IL 60191
TITLE	AS
NAME	TSUNASHIMA, YUICHI
STREET ADDRESS	1500 MICHAEL DR.
CITY - ST - ZIP	WOOD DALE IL 60191
TITLE	AS
NAME	PARISI, JOSEPH S
STREET ADDRESS	ONE E. WACKER DR., STE. 3200
CITY - ST - ZIP	CHICAGO IL 60601-1802

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Minoru Shibata
23 STREET ADDRESS	1500 Michael Drive
24 CITY - ST - ZIP	Wood Dale, Illinois 60191
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (07)(3)(b), 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 in an attachment with an address.

SIGNATURE: *Norio Yamaguchi*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Norio Yamaguchi, Treasurer

3/15/95

708-860-4206