2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # F95000002226 May 01, 2000 8:00 am Secretary of State HITACHI DATA SYSTEMS CREDIT CORPORATION 05-01-2000 90432 008 ***150.00 Principal Place of Business Mailing Address 750 CENTRAL EXPRESSWAY 750 CENTRAL EXPRESSWAY SANTA CLARA CA 95050 SANTA CLARA CA 95050-2627 047004 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FÉI Number 94-2837030 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE **₹** Delete TITLE ☐ Change ▼ Addition PRESIDENT DEBORAH, PINKSTON NAME NAME SATOSHI KAWAMOTO STREET ADDRESS STREET ADDRESS 750 CENTRAL EXPRESSWAY 750 CENTRAL EXPRESSWAY SANTA CLARA, CA 95050 CITY-ST-ZIP CITY-ST-ZIP SANTA CLARA CA 95050 ☐ Addition ☐ Delete TITLE Change TITLE NAME ROBERSON, DAVID É NAME STREET ADDRESS STREET ADDRESS 750 CENTRAL EXPRESSWAY CITY-ST-ZIE CITY-ST-ZIP SANTA CLARA CA 95050 TITLE ☐ Change TITLE Delete VICE PRESIDENT & TREASURER -HAWKINS, SCOTT LUBRATICH, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 750 CENTRAL EXPRESSWAY 50 CENTRÁL EXPRESSWAY ANTA CLARA, CA 95050 CITY-ST-7IP CITY-ST-ZIP SANTA CLARA CA 95050 ·D-**X** Delete TITLE Change ☐ Addition -YOUNG, DOUGLAS R NAME NAME STREET ADDRESS STREET ADDRESS 750-CENTRAL-EXPRESSWAY CITY-ST-ZIP CITY-ST-ZIP SANTA-GLARA-GA-95050 ☐ Delete Change ☐ Addition LOWERY, ALVIN NAME STREET ADDRESS STREET ADDRESS 10850 N. SUMMER MOON PLACE CITY-ST-ZIP CITY-ST-ZIP ORO VALLEY AZ 85737

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

STREET ADDRESS

CITY-ST-ZIP

SECRETARY

ALASTAIR A. SHORT

750 CENTRAL EXPRESSAY

<u>SANTA CLARA, CA 95050</u>

SIGNATURE:

COPLANS, GREGORY M-

SANTA CLARA CA 95050

750 CENTRAL EXPRESSWAY

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VICE PRESIDENT & TREASURER MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

04/26/00

408-970-4438

Daytime Phone #

☐ Change

X Addition