

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 DEC 15 PM 1:59

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # F97000004103

1. Corporation Name
TOYOTA TSUSHO CORPORATION



REINSTATEMENT 99
 DO NOT WRITE IN THESE SPACES

Principal Place of Business: TOKYO HEAD OFFICE 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME TOKYO JAPAN
 Mailing Address: TOKYO HEAD OFFICE 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME TOKYO JAPAN

| | | | | | | | |
|--------------------------------|--|---------------------|--|---|--|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | | Applied For | |
| 21 | | 26 | | 38-2527102 | | Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| 22 | | 27 | | <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | | <input type="checkbox"/> | |
| 23 | | 28 | | 8. This corporation owes the current year Intangible Personal Property Tax. | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Zip | | Zip | | Country | | Country | |
| 24 | | 25 | | 29 | | 30 | |

3. Date Incorporated or Qualified: 08/05/1997

9. Name and Address of Current Registered Agent: O'HAIRE, MICHAEL 3111 CARDINAL DRIVE VERO BEACH FL 32964

10. Name and Address of New Registered Agent: (Empty)

| | | | |
|---|--|-------------|--|
| 81 Name | | 85 Zip Code | |
| 82 Street Address (P.O. Box Number is Not Acceptable) | | FL | |
| 83 | | 84 City | |

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]* DATE: 12/9/99

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|---|
| TITLE | D <input type="checkbox"/> DELETE | 1.1 TITLE | D <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | CHIWA, HIROSHI | 1.2 NAME | KONDO, MASATSUGU |
| STREET ADDRESS | 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME | 1.3 STREET ADDRESS | C/O TOYOTA TSUSHO CORPORATION |
| CITY-ST-ZIP | TOKYO, JAPAN | 1.4 CITY-ST-ZIP | AT ABOVE MAILING ADDRESS. |
| TITLE | D <input type="checkbox"/> DELETE | 2.1 TITLE | D <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FUJITA, SENJI | 2.2 NAME | FURUKAWA, MASAAKI |
| STREET ADDRESS | 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME | 2.3 STREET ADDRESS | C/O TOYOTA TSUSHO CORPORATION |
| CITY-ST-ZIP | TOKYO, JAPAN | 2.4 CITY-ST-ZIP | AT ABOVE MAILING ADDRESS. |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 3.1 TITLE | 600003079266--1 |
| NAME | OKUZUMI, SHIRO | 3.2 NAME | -12/23/99--01050--009 |
| STREET ADDRESS | 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME | 3.3 STREET ADDRESS | ***750.00 ***750.00 |
| CITY-ST-ZIP | TOKYO, JAPAN | 3.4 CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 4.1 TITLE | |
| NAME | TAKEYAMA, EIZO | 4.2 NAME | |
| STREET ADDRESS | 8-34 3-CHOME TOKUGAWAYAMA CHO | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | CHIKUSA KU NAGOYA | 4.4 CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 5.1 TITLE | |
| NAME | KATO, MASARU | 5.2 NAME | |
| STREET ADDRESS | 3-18 CHIYODA KU 102 KUDAN MINAMI 2 CHOME | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | TOKYO, JAPAN | 5.4 CITY-ST-ZIP | |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 6.1 TITLE | |
| NAME | NISHINAKA, SADAYASU | 6.2 NAME | |
| STREET ADDRESS | 48-151 IKEDA YAHAGI CHO | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | OKAZAKI AICHI PREF | 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 9/29/99 DAYTIME PHONE #: 606-746-7800

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