

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 26, 2000 8:00 am**  
**Secretary of State**

02-26-2000 90016 047 \*\*\*150.00

**DOCUMENT # F97000004460**

1. Entity Name

**HITACHI CREDIT AMERICA CORP.**

Principal Place of Business 777 W. PUTNAM AVE. GREENWICH CT 06830	Mailing Address 777 W. PUTNAM AVE. GREENWICH CT 06830-5091
---	--

2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>33-0380629</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

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

**LEXIS DOCUMENT SERVICES INC.**  
**3953 WW KELLEY RD.**  
**TALLAHASSEE FL 32311**

**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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete <b>DREW, RICHARD J</b> 15 LOCUST RD. GREENWICH CT 06831
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete <b>DEGENOVA, ROBERT</b> 97 RICHARDS AVE., AA5 NORWALK CT 06854
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete <b>RIORDAN, BRIAN</b> 276 CEDARWOOD RD. STAMFORD CT 06903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Delete <b>O'KAWA, HIDEFUMI</b> ONE MILBANK AVE #3C GREENWICH CT 06830
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete <b>KOMURA, AKIHIRO</b> 82 GARDINER ST. DARIEN CT 06820
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete <b>FIorentino, MARK</b> 2289 BEDFORD ST. STAMFORD CT 06905

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>William Besgen</b> 59 Pepper Lane New Canaan, CT 06840
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>David Connolly</b> Stamford, CT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Yoshi Kobayashi</b> 130 Kirby Lane Rye, NY 10580
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Tanaka, Hidekazu</b> 270 North Street Rye, NY 10580
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Yoshimichi Otani</b> Nishi Shimbashi Minato-KU, Tokyo 105 Japan
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Atoushi Washida</b> 1723-34, Kamisato - CHO Sakae-KU, Yokohama 247 Japan

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.

SIGNATURE: *Terry Hatfield* **Terry Hatfield** 2/3/2000 (203) 531-0232  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)