

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 21, 2001 8:00 am**  
**Secretary of State**

08-21-2001 90001 015 \*\*\*550.00

**DOCUMENT # F97000004808**

1. Entity Name  
**HITACHI SEMICONDUCTOR (AMERICA) INC.**

Principal Place of Business

**179 EAST TASMAN DRIVE  
 SAN JOSE CA 95134**

Mailing Address

**179 EAST TASMAN DRIVE  
 SAN JOSE CA 95134**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**75-1609083**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
 After September 12, 2001 Fee will be \$750.00  
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                       |                                            |
|----------------|-----------------------|--------------------------------------------|
| TITLE          | COBD                  | <input checked="" type="checkbox"/> Delete |
| NAME           | NOMIYA, KOSEI         |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |
| TITLE          | D                     | <input checked="" type="checkbox"/> Delete |
| NAME           | CLARK, PETER          |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |
| TITLE          | D                     | <input type="checkbox"/> Delete            |
| NAME           | OGASAWARA, YUJI       |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |
| TITLE          | D                     | <input type="checkbox"/> Delete            |
| NAME           | HASEGAWA, KUNIO       |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |
| TITLE          | D                     | <input type="checkbox"/> Delete            |
| NAME           | ITO, HIDEAKI          |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |
| TITLE          | D                     | <input checked="" type="checkbox"/> Delete |
| NAME           | SHIMAYAMA, TOMOHARU   |                                            |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                            |
| CITY-ST-ZIP    | SAN JOSE CA 95134     |                                            |

|                |                       |                                                                              |
|----------------|-----------------------|------------------------------------------------------------------------------|
| TITLE          | CEO                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | ITO, SATORU           |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |
| TITLE          | COO                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | MAHONEY, DANIEL M.    |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |
| TITLE          | V                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | BABA, SHIRO           |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |
| TITLE          | TREASURER             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | KANO, TAKASHI         |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |
| TITLE          | VP, D                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | UEDA, KAZUHIRO        |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |
| TITLE          | D                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | KOSHIMIZU, YOSHIHIRO  |                                                                              |
| STREET ADDRESS | 179 EAST TASMAN DRIVE |                                                                              |
| CITY-ST-ZIP    | SAN JOSE, CA 95134    |                                                                              |

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:

**TAKASHI KANO**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**07-06-01**  
 Date

**408-433-1990**  
 Daytime Phone #

CR2E034 (5/01)