

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

FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K50126 (7)

1. Corporation Name
EAST MEC, INC.



Principal Place of Business C/O JOHN SPUCHEES, ESO., DEWEY BALLANTINE 1301 AVENUE OF THE AMERICAS NEW YORK NY 10019-6092	Mailing Address C/O JOHN SPUCHEES, ESO., DEWEY BALLANTINE 1301 AVENUE OF THE AMERICAS NEW YORK NY 10019-6092
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	30

3. Date Incorporated or Qualified 12/08/1988	
4. FEI Number 65-0087265	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HAMILTON, RUSSEL T.
 5355 TOWN CENTER ROAD
 BOCA RATON FL 33486**

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

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 _____ (NOTE: Registered Agent signature required when translating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	YAMAZAKI, TAKETO
STREET ADDRESS	30 ROCKEFELLER PLAZA
CITY - ST - ZIP	NEW YORK NY
TITLE	VP <input type="checkbox"/> DELETE
NAME	AMANO, MASAMI
STREET ADDRESS	30 ROCKEFELLER PLAZA
CITY - ST - ZIP	NEW YORK NY
TITLE	D <input type="checkbox"/> DELETE
NAME	TAKAGI, SHIGERU
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325
CITY - ST - ZIP	NEW YORK NY
TITLE	D <input type="checkbox"/> DELETE
NAME	NAKABAYASHI, MASAHIKO
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325
CITY - ST - ZIP	NEW YORK NY
TITLE	PD <input type="checkbox"/> DELETE
NAME	KAZUHIKO ARAHATA
STREET ADDRESS	30 ROCKEFELLER PLAZA, SUITE 4325
CITY - ST - ZIP	NEW YORK NY
TITLE	D <input type="checkbox"/> DELETE
NAME	SAIGO, TERUHISA
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325
CITY - ST - ZIP	NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Tan, Eiji
1.3 STREET ADDRESS	30 Rockefeller Plaza
1.4 CITY - ST - ZIP	New York, NY 10112
2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Yotsuzuka, Yutaro
2.3 STREET ADDRESS	30 Rockefeller Plaza
2.4 CITY - ST - ZIP	New York, NY 10112
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(i), 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.

SIGNATURE _____ **Kazuhiko Arahata 1/16/98 1919 608 8800**

CR2E034 (10/97)