

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Suzanne B. Norstrom
Secretary of State
DIVISION OF CORPORATIONS



APPROVED AND FILED

MAY - 1 11 2:33

RECEIVED FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P06891** (6)
1. Corporation Name
EPSON AMERICA, INC.

Principal Place of Business: **20770 MADRONA AVENUE TORRANCE CA 90503-3777**
Mailing Address: **20770 MADRONA AVENUE TORRANCE CA 90503-3777**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2b. Mailing Address		3. Date Incorporated or Qualified 07/26/1985	3a. Date of Last Report 04/21/1994
21	26		4. FEI Number 95-2935679		Applied for <input type="checkbox"/> Not Applicable
22. Subj. Apt. #, etc.		27. Subj. Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. State	29. Zip	30. State	6. This corporation has liability for intangible tax under s. 199.03, Florida Statutes. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCEO	1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NIWA, NORIO	2. NAME	See attached list
STREET ADDRESS	20770 MADRONA AVE	3. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	4. CITY, ST, ZIP	
TITLE	EVST	21. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KAWIA, SHOSUKE	22. NAME	
STREET ADDRESS	20770 MADRONA AVE	23. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	24. CITY, ST, ZIP	
TITLE	EVPC	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANG, JOHN D	32. NAME	
STREET ADDRESS	20770 MADRONA AVE	33. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	34. CITY, ST, ZIP	
TITLE	VP	41. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BULOT, RICHARD	42. NAME	
STREET ADDRESS	20770 MADRONA AVE	43. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	44. CITY, ST, ZIP	
TITLE	VP	51. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONFREY, JOHN R	52. NAME	
STREET ADDRESS	20770 MADRONA AVE	53. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	54. CITY, ST, ZIP	
TITLE	VP	61. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOUND, ALAN D	62. NAME	
STREET ADDRESS	20770 MADRONA AVE	63. STREET ADDRESS	
CITY, ST, ZIP	TORRANCE CA	64. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(b), Florida Statutes. I further certify that the information indicated on this 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as an alteration with an address.

SIGNATURE: *Shosuke Kawai* 04/25/95 (310) 782-0770
SIGNATURE AND TYPED OR PRINTED NAME OF DOMING OFFICER OR DIRECTOR
Shosuke Kawai, Executive Vice President & Secretary