

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 18, 2001 08:00 AM
Secretary of State

DOCUMENT # P11238

1. Entity Name
MITSUBISHI HEAVY INDUSTRIES AMERICA, INC.

Principal Place of Business 630 FIFTH AVENUE SUITE 3155 NEW YORK 10111 US	NY	Mailing Address 630 FIFTH AVENUE SUITE 3155 NEW YORK 10111 US	NY
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

4. FEI Number
36-3031033

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	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 US		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 **04/18/2001**

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 \$150.00
After MAY 1, 2001 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				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	SO	<input type="checkbox"/> Delete		TITLE	SO	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HARADA YOICHIRO			NAME	YAMAMOTO HIROAKI		
STREET ADDRESS	630 FIFTH AVENUE, STE 3155			STREET ADDRESS	630 FIFTH AVENUE, STE 3155		
CITY-ST-ZIP	NEW YORK NY 10111			CITY-ST-ZIP	NEW YORK NY 10111		
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FELLER JOHN L			NAME			
STREET ADDRESS	13465 SPENCERVILLE ROAD			STREET ADDRESS			
CITY-ST-ZIP	PENN VALLEY CA			CITY-ST-ZIP			
TITLE	TO	<input type="checkbox"/> Delete		TITLE	TO	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SHIRAHAMA YOSHIHIRO			NAME	HATTORI KENSUKE		
STREET ADDRESS	630 FIFTH AVE SUITE 3155			STREET ADDRESS	630 FIFTH AVE SUITE 3155		
CITY-ST-ZIP	NEW YORK NY 10111			CITY-ST-ZIP	NEW YORK NY 10111		
TITLE	VD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	AYABE TOSHIARU			NAME			
STREET ADDRESS	600 CHERRY FORK AVE			STREET ADDRESS			
CITY-ST-ZIP	LEETONIA OH			CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	TAKI KENTARO			NAME			
STREET ADDRESS	660 NEWPORT CENTER DRIVE STE 1000			STREET ADDRESS			
CITY-ST-ZIP	NEWPORT BEACH CA			CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	EGAWA HIDEO			NAME			
STREET ADDRESS	630 FIFTH AVENUE, STE 3155			STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY			CITY-ST-ZIP			

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: HIROAKI YAMAMOTO **SO** 04/18/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)