

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Markham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34088

(5)

1. Corporation Name

MTSUI O.S.K. LINES AMERICA INC.



Principal Place of Business

**HARBORSIDE FINANCIAL CENTER
601
JERSEY CITY NJ 07311
US**

Mailing Address

**HARBORSIDE FINANCIAL CENTER
601
JERSEY CITY NJ 07311
US**

2. Principal Place of Business

2a. Mailing Address

21 State Apt. #, etc.

26 State Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 601, 602, and 603, Florida Statutes, the above named corporation is hereby filing this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was a voluntary one; the corporation has been notified in writing by a script the appointment of a registered agent. I am familiar with and accept the obligation of Section 602, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ OFFICE
NAME	KAMADA, M.	
STREET ADDRESS	HARBORSIDE FIN'L CTR.	
CITY, STATE, ZIP	JERSEY CITY NJ 07311	
TITLE	SVP	☐ OFFICE
NAME	TERAMOTO, AKIHIKO	
STREET ADDRESS	HARBORSIDE FINANCIAL CTR.	
CITY, STATE, ZIP	JERSEY CITY NJ	
TITLE	SVP	☐ OFFICE
NAME	SCHOENHAUS, STEPHEN	
STREET ADDRESS	HARBORSIDE FIN'L CTR.	
CITY, STATE, ZIP	JERSEY CITY NJ	
TITLE	DC	☐ OFFICE
NAME	IKUTA, MASAHARU	
STREET ADDRESS	HARBORSIDE FIN'L CTR.	
CITY, STATE, ZIP	JERSEY CITY NJ 07311	
TITLE	S	☐ OFFICE
NAME	LUZZATTO, ERNESTO	
STREET ADDRESS	14 WALL ST.	
CITY, STATE, ZIP	NEW YORK NY	
TITLE		☐ OFFICE
NAME		
STREET ADDRESS		
CITY, STATE, ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. NAME	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. NAME	☒ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. NAME	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. NAME	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	

President

14. I hereby certify that the information supplied herein is true and correct to the best of my knowledge, for the example provided in Section 119.07(3)(a), Florida Statutes. I further certify that the information is not false, and that no officer or director of the corporation has been notified in writing that my signature shall have the same legal effect as it made under oath that I am an officer or director of the corporation and that the corporation is duly organized and in good standing under the laws of the State of Florida, and that my name appears on Block 12 of Block 12 of the corporation's statement with an address.

SIGNATURE: Stephen Schoenhaus **Stephen Schoenhaus, Senior Vice President** **4/15/96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)