FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:44

DOCUMENT # P38067 (5)

1. Corporation Name
BRUCE TECHNOLOGIES INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
25 ESQUIRE ROAD NORTH BELLRICA MA 01862	25 ESQUIRE ROAD NORTH BELLRICA MA 01862

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/26/1992
3a. Date of Last Report: 10/05/1994
4. FEI Number: 04-3144511 (Applied For / Not Applicable)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when executing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO	11 TITLE	☒ Change ☐ Addition
NAME	SUZUKI, MAKOTO	12 NAME	
STREET ADDRESS	1065-23 KOUNOSUDAI	13 STREET ADDRESS	192 Kennedy Dr.
CITY-ST-ZIP	NAGAREYAMA CTY,JAPAN	14 CITY-ST-ZIP	Malden, Ma.
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	MACAULIFFE, ROBERT P.	22 NAME	
STREET ADDRESS	23 ELLEN ROAD	23 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON MA	24 CITY-ST-ZIP	
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	NEUWIRTH, ALAN J.	32 NAME	
STREET ADDRESS	216 RIVER ROAD	33 STREET ADDRESS	
CITY-ST-ZIP	SACRBOROUGH NY	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☒ Change ☐ Addition
NAME	SUZUKI, TAKERO	42 NAME	
STREET ADDRESS	6-21-25 ICHIBANCHOU	43 STREET ADDRESS	19 Kessler Farm Dr.
CITY-ST-ZIP	TOKYO, JAPAN 190	44 CITY-ST-ZIP	Nashua, NH
TITLE	D	51 TITLE	D ☒ Change ☐ Addition
NAME	TSUBAKI, TOSHIRO	52 NAME	KOZO TAMIYA
STREET ADDRESS	FLAT EYE 201, 2-11-20	53 STREET ADDRESS	3-14-20 Higashi-Nakano
CITY-ST-ZIP	TOKYO, JAPAN 155	54 CITY-ST-ZIP	Nakano-ku Tokyo-164
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	SASAKI, MASAAKI	62 NAME	
STREET ADDRESS	3-15-21 HINOMINAMI KOUNA	63 STREET ADDRESS	
CITY-ST-ZIP	KANAGAWA-PRE, JAPAN	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(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: [signature] 1/26/95 (508) 670-5501
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number

0474065 FP