## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P38067

1. Entity Name

KOKÚSAI SEMICONDUCTOR EQUIPMENT CORPORATION

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FILED Apr 14, 2008 08:00 A Secretary of State

Principal Place of Business

2460 N FIRST ST, STE 290 SAN JOSE, CA 95131 US Mailing Address

2460 N FIRST ST, STE 290 SAN JOSE, CA 95131 US



DO NOT WRITE IN THIS SPACE

04072008 No Chg-P

CR2E034 (11/05)

4. FEI Number 04-3144511

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 DO NOT WRITE IN THIS SPACE

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable,

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 **9.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees U00000893790 04/24/08-80002-006 150.00

OFFICERS AND DIRECTORS 10. CCEO TITLE NAME OZAWA, MASAKAZU STREET ADDRESS 2460 N FIRST ST, STE 290 CITY-ST-ZIP SAN JOSE, CA 95131 TITLE NAME SATO, KEN-ICHI 2460 N FIRST ST, STE 290 STREET ADDRESS CITY-ST-ZIP **SAN JOSE, CA 95131** TITLE NAME BERNANDI, ROBERT 1211 SE CARDINAL CT, STE 130 STREET ADDRESS CHY-ST-7IP VANCOUVER, WA 98683 D TITLE NEUWIRTH, ALAN NAME STREET ADDRESS 101 PARK AVENUE CITY-ST-ZIP NEW YORK, NY 10178 TITLE AKITA, YUKIO NAME STREET ADDRESS 2460 N FIRST ST, STE 290 **SAN JOSE, CA 95131** CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other-like empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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408-456-2750

Daytime Phone #