## \*FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

F93000001519 (8)

CASIO, INC.

Principal Place of Business

570 MT. PLEASANT AVENUE DOVER NJ 07801 Mailing Address

570 MT. PLEASANT AVENUE DOVER NJ 07801 FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 03/26/1993

27 City & State Country Cip Country Cip Country C	\$8.75 Adding Fee Requirements For Management Added to First year Intangement Yes \( \sqrt{N} \) N	pplicable litional ired ay Be ees	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired  City & State  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  Country  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fection Campaign Financing Trust Fund Contribution  Trust Fund Contribution  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fection Campaign Financing Trust Fund Contribution  Frust Fund Contribution  Suite, Apt. #, etc.  5. Certificate of Status Desired  Country  Trust Fund Contribution  Fection Campaign Financing Trust Fund Contribution  Desired  Tout Fund Contribution  Personal Property Tax due June 30.  Name and Address of Current Registered Agent  CASIO OUTLET STORE	\$8.75 Adding Fee Requirements For Management Added to First year Intangement Yes \( \sqrt{N} \) N	ired ay Be Fees	
27   State   City & State   City & State   City & State   Gity & State   City & State   Gity & Gountry   Trust Fund Contribution   Gity & Gountry   State   Gity & Gountry   Gity & Gou	Fee Requi  \$5.00 Ma Added to F  Int year Intang  Yes \[ \sum \] N	ired ny Be ees gible	
City & State  Country  Country  Country  Zip  Country  Zip  Country  Solution  Solution  Country  Fersonal Property Tax due June 30.  Solution  Solution  Solution  Solution  Solution  Solution  Solution  Country  Solution  Solution  Solution  Solution  Solution  Country  Solution	\$5.00 Ma Added to F int year Intang Yes N	ny Be ees gible	
23 Trust Fund Contribution  Zip Country Zip Country  24 25 29 30 Personal Property Tax due June 30.   9. Name and Address of Current Registered Agent  CASIO OUTLET STORE  Trust Fund Contribution  8. This corporation owes or has paid the curren Personal Property Tax due June 30.   10. Name and Address of New Registered Agent  Name	Added to F  nt year Intang  Yes	ees jible	
Zip Country Zip Country 8. This corporation owes or has paid the curren Personal Property Tax due June 30. S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CASIO OUTLET STORE	nt year Intang Yes	gible	
24   25   29   30   Personal Property Tax due June 30.   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   Name   Name	Yes N		
9. Name and Address of Current Registered Agent  CASIO OUTLET STORE  10. Name and Address of New Registered Agent Name		40 '	
CASIO COLLET STORE			
FOCE INTERNATIONAL DONG			
SUITE B  82 Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32819			
ORLANDO PE 32018			
84 City FL E	85 Zip Cod	le	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of ch	nanging its re	gistered	
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 choffice 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 appoint agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	itment as regi	istered	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE			
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DI	IRECTORS IN	N 12	
		Addition	
NAME MCDONALD, JOHN J 12 NAME	, onlings		
STREET ADDRESS 570 MT. PLEASANT AVE. 13 STREET ADDRESS		1	
DOVED NI OZGOŁ			
77.07.21	Change	Addition	
NAME YAMAZAKI, ZENTARO 22 NAME	) Crossinge	_ Addition	
CTART DISTABLE NO		1	
DOVED NI 07004		i	
	I Observe T	T A station as	
	Change L	_l Addition	
NAME NAKAGAKI, EISEI 3.2 NAME			
STREET ADDRESS 570 MT. PLEASANT AVE. 3.3 STREET ADDRESS			
CITY-ST-ZIP DOVER NJ 07801 34. CITY-ST-ZIP		<b>.</b>	
TITLE DELETE 4.1 TITLE	I Change L	Addition	
NAME 4.2 NAME			
STREET ADDRESS 4.3 STREET ADDRESS			
CITY-ST-ZIP 4.4 CITY-ST-ZIP			
TITLE DELETE 5.1 TITLE	Change	_ Addition	
NAME 5.2 NAME			
STREET ADDRESS 5.3 STREET ADDRESS			
CITY-ST-ZIP 5.4 CITY-ST-ZIP			
TITLE DELETE 6.1 TITLE	Change	Addition	
NAME 5.2 NAME			
STREET ADDRESS 6.3 STREET ADDRESS			
CITY-ST-ZIP 6.4 CITY-ST-ZIP			
14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify indicated on this enture length effect as if made under	that the info	rmation	

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:

ALLUCIALISM IN THE COMMENT

1-19-98

034 (10/97)