2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # 844786

ANNUAL REPORT (AR)						Δnr 21 2004 8·00 am	
DOCUMENT # 844786 1. Entity Name HITACHI DATA SYSTEMS CORPORATION						Apr 21, 2004 8:00 am Secretary of State 04-21-2004 90074 026 ***150.00	
THEADIN DATA STOTEMO COM CHATION					usi.		
Principal Place of Business		Mailing Address					
750 CENTRAL EXPRESSWAY P O BOX 54996 SANTA CLARA CA 95056-0996		750 CENTRAL EXPRESSWAY P O BOX 54996 SANTA CLARA CA 95056-0996				A KERNIN IRIII BUSH SIDII IRRRI 16148 SHI BIRII BUSH BIRII BIRII BUSH BUSH BIRIIRRI IA 1851	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E034 (11/03)		
City & State		City & State			4. FEI Number 94-2603663 Applied For Not Applicable		
Zip Country ,		Zip Country		ry		5. Certificate of Status Desired See Required Fee Required	
· · · · · · · · · · · · · · · · · · ·	6. Name and Address of Current I	Registered Agent				7. Name and Address of New Registered Agent	
<u> </u>				Name			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324			Street Address (P.O. Box Number is Not Acceptable)				
. 4							
				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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agont and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State						9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE T		☐ Delete	TITLE		TREA	ASURER Change Addition	
NAME H	IENDERSON, GEORG E		NAME	:	HEND	DERSON, GEORDY	
I .	9383-KENT-WAY	T.		ET ADDRESS	2038	33 KENT WAY	
CITY-ST-ZIP	OS-GATOS GA-95033		CITY-	ST-ZIP	LOS	GATOS, CA 95033	
TITLE C		🔀 Delete	TITLE	i	DIRE	ECTOR \times Change \square Addition	
	IAKANISHI;≈HIROAKI		NAME	!		OAKI NAKANISHI	
	<u>-6-13 YOSHIMTO-CHO, KOUHOK</u> KANAGAWA, JAPAN 223-0-62	re-No		ET ADDRESS -ST-ZIP	1-6-	-13 YOSHIMOTO-CHO, KOUHOKU-KU, YOKOHAMA	
	CANTAGENTA, UNI AIN 225-0-02	Delete	-		DIRE	KANACATIA 223-0Ó62, JAPAN ECTOR	
TITLE C	IIDEAKI , Y ABE -	Lif Delete	TITLE	I	SHOO	GO MATSUOLELE MORIYASHI	
	0651-FORGE WAY, APT #243			ET ADDRESS		-3-MATSUMADAI MORIYASHI	
	CUPERTINO CA 95014		CITY-	-ST-ZIP	IBAF	RAKI, JAPAN	
TITLE S	}	☐ Delete	TITLE			☐ Change ☐ Addition	
NAME COPLANS, GREGORY M			NAME	E			
STREET ADDRESS 1003 HORIZON COURT			ET ADDRESS		·		
	DANVILLE CA 94526	·····	CITY-	-ST-ZIP			
	COOP ROBERSON, DAVID E	☐ Delete	TITLE			☐ Change ☐ Addition	
10.00	3681 OLD TREE WAY		NAME	ET ADDRESS			
D.III.CO	SARATOGA CA 95070		1	-ST-ZiP			
u 5. 2	CEO	D num	TITLE			Channe Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

IWATA, SHINJIRO

PALO ALTO CA 94304

1824 OAK CREEK DRIVE #301

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

E.V.P. & C.F.O.

04/02/04

FILED

(408) 970-1020

Davtime Phone #