

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90107 002 ***150.00

DOCUMENT # F93000001519



1. Entity Name
CASIO, INC.

Principal Place of Business
**570 MT. PLEASANT AVENUE
DOVER NJ 07801**

Mailing Address
**570 MT. PLEASANT AVENUE
DOVER NJ 07801**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **11-2215214**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CASIO OUTLET STORE
5265 INTERNATIONAL DRIVE
SUITE B
ORLANDO FL 32819**

Name

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

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
RADO, GARY
570 MT. PLEASANT AVE.
DOVER NJ 07801** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
JOHN CLOUGH
570 MT. PLEASANT AVE.
DOVER, NJ 07801** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
CLOUGH, JOHN
570 MT. PLEASANT AVENUE
DOVER NJ 07801** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP
TOMOYUKI UCHIYAMA
570 MT. PLEASANT AVE.
DOVER, NJ 07801** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
D'AGOSTINO, JOSEPH
570 MT. PLEASANT AVENUE
DOVER NJ 07801** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EXEC, VICE PRESIDENT/CFO
JOHN COX
570 MT. PLEASANT AVE.
DOVER, NJ 07801** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
IRIE, KEITA
570 MT. PLEASANT AVE
DOVER NJ 07801** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
STRANG, JERRY
570 MT. PLEASANT AVENUE
DOVER NJ 07801** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ROBERTS, NEIL
570 MT. PLEASANT AVENUE
DOVER NJ 07801** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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.

SIGNATURE:

SIGNATURE *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/2003

Date

Daytime Phone #

CR2E034 (10/02)