

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004283

Entity Name: MARUBENI POWER INTERNATIONAL, INC.**Current Principal Place of Business:**375 LEXINGTON AVENUE
NEW YORK, NY 10017**Current Mailing Address:**375 LEXINGTON AVENUE
NEW YORK, NY 10017 US**FEI Number:** 90-0769742**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BOYDEN, RICHARD
Address 375 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR, PRESIDENT
Name WAKAYAMA, MINAKO
Address 375 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR
Name HARADA, SATORU
Address TOKYO NIHOMBASHI TOWER, 7-1,
NIHONBASHI 2-CHOME
City-State-Zip: TOKYO CHUO-KU 103-6060

Title DIRECTOR
Name NAKAMURA, TAKEHIRO
Address TOKYO NIHOMBASHI TOWER, 7-1,
NIHONBASHI 2-CHOME
City-State-Zip: TOKYO CHUO-KU 103-6060

Title DIRECTOR
Name MORIYAMA, KEISUKE
Address TOKYO NIHOMBASHI TOWER, 7-1,
NIHONBASHI 2-CHOME
City-State-Zip: TOKYO CHUO-KU 103-6060

Title SECRETARY, TREASURER
Name TANIGAKI, SEIICHIRO
Address 375 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10017

Title ASST. SECRETARY
Name ANCOSKY, MICHELLE
Address 375 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10017

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE ANCOSKY**ASST. SECRETARY****04/22/2019**

Electronic Signature of Signing Officer/Director Detail

Date