Entity Name: SUMITOMO (SHI) DEMAG PLASTICS MACHINERY NORTH AMERICA, INC.

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

410 HORIZON DRIVE SUITE 200 SUWANEE, GA 30024

Current Mailing Address:

DOCUMENT# F13000005335

410 HORIZON DRIVE SUITE 200 SUWANEE, GA 30024 US

FEI Number: 58-1396267

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail :

Title	EXECUTIVE VP & COO	Title	SECRETARY
Name	MARTICH, JOHN F III,COO	Name	BUSS, DENNIS A
Address	410 HORIZON DRIVE	Address	360 WILLARD ROAD
	SUITE 200	City-State-Zin	AURORA OH 44202
City-State-Zip:	SUWANEE GA 30024	ony olate zip.	
Title	PRESIDENT & DIRECTOR		
Name	ISHIKAWA, KATSUHIRO		
Address	410 HORIZON DRIVE SUITE 200		
City-State-Zip:	SUWANEE GA 30024		
	Title Name Address City-State-Zip: Title Name Address	TitleEXECUTIVE VP & COONameMARTICH, JOHN F III,COOAddress410 HORIZON DRIVE SUITE 200City-State-Zip:SUWANEE GA 30024TitlePRESIDENT & DIRECTORNameISHIKAWA, KATSUHIROAddress410 HORIZON DRIVE SUITE 200	NameMARTICH, JOHN F III,COONameAddress410 HORIZON DRIVE SUITE 200Address City-State-Zip:City-State-Zip:SUWANEE GA 30024City-State-Zip:TitlePRESIDENT & DIRECTOR ISHIKAWA, KATSUHIROFree Side Side Side Side Side Side Side Si

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: JOHN MARTICH III

EXECUTIVE VP & COO 03/08/2019

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Date