

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000006906

**Entity Name:** KOWA RESEARCH INSTITUTE, INC.**Current Principal Place of Business:**430 DAVIS DR., STE. 200  
MORRISVILLE, NC 27560**Current Mailing Address:**430 DAVIS DR., STE. 200  
MORRISVILLE, NC 27560**FEI Number:** 77-0450319**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORPORATING SERVICES, LTD.  
1540 GLENWAY DR.  
TALLAHASSEE, FL 32301 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            PRESIDENT, DIRECTOR  
Name            GORDON, GARY  
Address        430 DAVIS DR., STE. 200  
City-State-Zip: MORRISVILLE NC 27560

Title            SECRETARY  
Name            NISHIZAWA, KEIKI  
Address        500 BOYLSTON ST., 17TH FLOOR  
City-State-Zip: BOSTON MA 02116

Title            DIRECTOR  
Name            MIZUMO, KEN  
Address        500 BOYLSTON ST 17TH FLOOR  
City-State-Zip: BOSTON MA 02116

Title            DIRECTOR  
Name            OSHIMA, RYU  
Address        500 BOYLSTON ST 17TH FLOOR  
City-State-Zip: BOSTON MA 02116

Title            DIRECTOR  
Name            HATA, SATOSHI  
Address        55 E. 59TH ST., STE. 19C  
City-State-Zip: NEW YORK NY 10022

Title            DIRECTOR  
Name            OKUMURA, MUTSUO  
Address        4-14, NIHONBASHI-HONCHO 3-  
                     CHOME CHUOKU  
City-State-Zip: TOKYO 1038433

Title            DIRECTOR  
Name            NARUSAWA, TAKASHI  
Address        4-14, NIHONBASHI-HONCHO 3-  
                     CHOME CHUOKU  
City-State-Zip: TOKYO 1038433

Title            DIRECTOR  
Name            SUGANAMI, HIDEKI  
Address        4-14, NIHONBASHI-HONCHO 3-  
                     CHOME CHUOKU  
City-State-Zip: TOKYO 1038433

*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: GARY GORDON****PRESIDENT****04/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date