

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 832211

1. Entity Name
MITSUI & CO. (U.S.A.), INC.

Principal Place of Business

200 PARK AVENUE
NEW YORK NY 10166

Mailing Address

200 PARK AVENUE
NEW YORK NY 10166

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 13-2559853

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VTD
NAME IMAI, KAZUYA
STREET ADDRESS 100 FOX MEADOW ROAD
CITY-ST-ZIP SCARSDALE NY 10583 ☐ Delete

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

TITLE VD-
NAME SASAKI, TOSHIMIKO
STREET ADDRESS 117 E 57TH STREET
CITY-ST-ZIP NEW YORK NY 10022 ☒ Delete

TITLE VD
NAME Yotaro Wakayama
STREET ADDRESS 330 E. 38th St, Apt 32L
CITY-ST-ZIP New York, NY 10016 ☐ Change ☒ Addition

TITLE S-
NAME UEDA, TOSHI-
STREET ADDRESS 33 GREGORY ROAD
CITY-ST-ZIP GOS-COB CT 06807 ☒ Delete

TITLE S
NAME Kaku Kato
STREET ADDRESS 27 East 38th St, Apt 2A
CITY-ST-ZIP New York, NY 10166 ☐ Change ☒ Addition

TITLE EVD-
NAME SUNAMI, TAKAO
STREET ADDRESS 100 LAKESHORE DR.
CITY-ST-ZIP EASTCHESTER NY 10709 ☒ Delete

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

TITLE PD
NAME SHIMIZU, SHINJIRO
STREET ADDRESS 425 E 58TH STREET
CITY-ST-ZIP NEW YORK NY 10022 ☒ Delete

TITLE PD
NAME Katsuto Momii
STREET ADDRESS 425 E. 58th St, Apt 38E
CITY-ST-ZIP New York, NY 10022 ☐ Change ☒ Addition

TITLE V
NAME GETZ, ALAN
STREET ADDRESS 15 WILLIAMSBURG COURT
CITY-ST-ZIP E. BRUNSWICK NJ 08816 ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

Date

212-878-4000

Daytime Phone #

CR2E034 (10/00)