

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 APR 20 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

841836

1. Corporation Name

Savin Corporation

W04-12299

2. Principal Office Address

333 Ludlow Avenue

Suite, Apt. #, etc.

City & State

Stamford, CT

Zip

06904

Country

USA

3. Mailing Office Address

same as shown

Suite, Apt. #, etc.

City & State

REINSTATEMENT 02-04

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

13-2949772

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Stephen Adamo

STEPHEN ADAMO
ASSISTANT SECRETARY

REGISTERED AGENT MUST SIGN

Date

4/16/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	see attached		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Gary Carbonello

Gary Carbonello, Secretary 3/15/04

(973) 882-2193

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SAVIN CORPORATION

Officers:

Thomas Salierno, Jr., President & CEO
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Alan Nielsen, Vice President
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Fred Berger, Vice President
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Stuart Drayton, Vice President
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Mark Pollack, Vice President
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Jan Saperstein, Treasurer
333 Ludlow Street
Stamford Harbor Park
P.O. Box 10270
Stamford, CT 06904

Gary A. Carbonello, Secretary
Ricoh Corporation
5 Dedrick Place
West Caldwell, NJ 07006

Directors:

Susumu Ichioka
Ricoh Corporation
5 Dedrick Place
West Caldwell, NJ 07006

Kuni Minakawa
Ricoh Corporation
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