

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2008 8:00 am**  
**Secretary of State**

05-01-2008 90199 009 \*\*\*150.00

<b>DOCUMENT # 844786</b>					
<b>1. Entity Name</b> HITACHI DATA SYSTEMS CORPORATION					
<b>Principal Place of Business</b> 750 CENTRAL EXPRESSWAY MS 32-10 SANTA CLARA, CA 95050			<b>Mailing Address</b> 750 CENTRAL EXPRESSWAY MS 32-10 SANTA CLARA, CA 95050		
<b>2. Principal Place of Business - No P.O. Box #</b> 750 Central Expressway		<b>3. Mailing Address</b> 750 Central Expressway		Suite, Apt. #, etc. MS 32-10	
City & State Santa Clara, CA		City & State Santa Clara, CA		<b>4. FEI Number</b> 94-2603663	
Zip 95050		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
<b>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. I am familiar with, and accept the obligations of registered agent.</b> SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HENDERSON, GEORDY 20383 KENT WAY LOS GATOS, CA 95033	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAKANISHI, HIROAKI 1-6-13 YOSHIMTO-CHO, KOUHOKU-KU KANAGAWA, JAPAN, 223-062	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman, Board of Directors NAOYA TAKAHASHI 2-32-23 Katsuradaininami Yokohama-shi, Kanagawa JAPAN	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATSUO, SHOGO 3-4-3 MATSUMADAI MORIYASHI IBARAKI, JAPAN,	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Shinjiro Iwata 2400 W. El Camino Real Mountain View, CA 94040	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COPLANS, GREGORY M 1003 HORIZON COURT DANVILLE, CA 94526	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO KOSUGE, MINORU 19500 PRUNERIDGE AVE CUPERTINO, CA 95014	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHIEF EXECUTIVE OFFICER Minoru Kosuge 19500 Pruneridge Ave Cupertino, CA 95014	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP ROBERSON, DAVID E 13681 OLD TREE WAY SARATOGA, CA 95070	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHIEF OPERATING OFFICER Jack Dome 45 Balmoral Way Colorado Springs, CO 80906	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b>			Geordy Henderson		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		

(408) 970-1020