


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000001989	
1. Entity Name PARCEL J-I DEVELOPMENT, INC.	

Principal Place of Business C/O TOMEN AMERICA INC. 1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019	Mailing Address C/O TOMEN AMERICA INC. 1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019
--	--



04242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 06-1576331	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOSOHARA, TETSUO 1285 AVE. OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARAIA, JOHN A 1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HIRATA, MINORU 1285 AVE. OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WADA, AKIRA 1285 AVE. OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARAIA, JOHN 1285 AVE. OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PARRIS, RICHARD 1285 AVE. OF THE AMERICAS, 36TH FLOOR NEW YORK, NY 10019

U00000558583
05/17/06-80017-006 150.00

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: Tetsuo Hosohara - Tetsuo Hosohara Date: 04/25/06 Daytime Phone #: (212)397-5453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR