

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F04000002449

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



FILED
NOV 15
05 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
200 PARK AVENUE
NEW YORK, NY 10166-0130

Mailing Address
200 PARK AVENUE
NEW YORK, NY 10166-0130



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10252005 REIN-P CR2E098 (6/04)

City & State

City & State

4. FEI Number

13-2559853

Applied For

Not Applicable

Zip

Country

Zip

Country

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

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

600061447496

11/15/05--01072--001 **150.00

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. I am familiar with, and accept the obligations of registered agent.

Sohan Dindyal
Vice President

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

11/3/2005
DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Delete
NAME KONDO, TASUKU
STREET ADDRESS 2-1 OHTEMACHI, CHIYODA-KU
CITY-ST-ZIP TOKYO,

TITLE P/CEO ☒ Change ☐ Addition
NAME YOSHIDA, MOTOKAZU
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

TITLE PCEO ☒ Delete
NAME TADA, HIROSHI
STREET ADDRESS 2-1 OHTEMACHI, CHIYODA-KU
CITY-ST-ZIP TOKYO,

TITLE V ☒ Change ☐ Addition
NAME KOYAMA, OSAMU
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

TITLE VCFO ☒ Delete
NAME OKAZAWA, AKIRA
STREET ADDRESS 2-1 OHTEMACHI, CHIYODA-KU
CITY-ST-ZIP TOKYO,

TITLE V ☒ Change ☐ Addition
NAME MATSUBARA, KEIGO
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

TITLE VCAO ☒ Delete
NAME KATO, HIROYUKI
STREET ADDRESS 2-1 OHTEMACHI, CHIYODA-KU
CITY-ST-ZIP TOKYO,

TITLE V ☒ Change ☐ Addition
NAME KATO, HIROYUKI
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

TITLE VCIO ☐ Delete
NAME FUCHI, MASAO
STREET ADDRESS 2-1 OHTEMACHI, CHIYODA-KU
CITY-ST-ZIP TOKYO,

TITLE V ☐ Change ☒ Addition
NAME ISHIKAWA, YONEJI
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

TITLE V ☒ Delete
NAME KITAMURA, JUNSAKU
STREET ADDRESS 200 PARK AVENUE
CITY-ST-ZIP NEW YORK, NY 101660130

TITLE V ☒ Change ☐ Addition
NAME GETZ, ALAN
STREET ADDRESS 200 PARK AVE
CITY-ST-ZIP NEW YORK, NY 10166

12. 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 10 or Block 11 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

11/1/05

Date

(212) 878-6720

Daytime Phone #