2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2005 8:00 am Secretary of State

DOCUMENT # F0400002763 1. Entity Name TOMEN AMERICA INC.					05-03-2005 90086 037 ***150.00					
Principal Plac	e of Business	Mailing Address	·	• • • • • • • • • • • • • • • • • • • •						
1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019		1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019			•					
2. Principal Place of Business		3. Mailing Address			B.B.III B.J.SII B.B.III B.B.III B.B.III					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04252005	Chg-P	CR2E034 (10/03)				
City & State		City & State			4. FEI Numbe		No	plied For t Applicable		
Zip	Country	Zip	Country		5. Certificate	of Status Desired	S8.75 Add Fee Require			
	6. Name and Address of Current R	egistered Agent		N	7. Name and	Address of New R	egistered Agent			
COPPOR	ATION SERVICE COMPANY			Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE, FL 32301-2525										
				City			FL Zip Code	9		
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.								and accept		
wio obligat	one or regionares agerni									
SIGNATURE Signature, lyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	.00 May Be ed to Fees			,					
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11		
TITLE	DCP	☐ Delete	TITLE	I	P/S		☐ Change	★ Addition		
NAME STREET ADDRESS			NAME STREET		RAIA, JO					
CITY-ST-ZIP	NEW YORK, NY 10019		CITY-SI	r-zip Ne	w York,	ne of the NY 10019	AMericas			
TITLE	VP	₹ Delete	TITLE	VP)		☐ Change	 ★ Addition		
NAME STREET ADDRESS	OHTAKE, KAZUO 1285 AVENUE OF THE AMERICA	.s	NAME STREET		RATA, MI	NORU ie of the .	Americas			
CITY-ST-ZIP	NEW YORK, NY 10019	•	CITY-ST			NY 10019	UMCITCQ2			
THILE	VP	☐ Delete	TITLE	VP)		Change	K Addition		
NAME .	HOSOHARA, TETSUO	e company	NAME		DA,_AKIF		A=====================================			
STREET ADDRESS CITY-ST-ZIP	1285 AVENUE OF THE AMERICA NEW YORK, NY 10019	.5	CITY-SI	,		ie of the . NY 10019	Americas			
TITLE	VP	Delete	TITLE	VP)		☐ Change	Addition		
NAME STREET ADDRESS	NOUE, TODD 1285 AVENUE OF THE AMERICA	e	NAME			TOSHITAK rest Ln.,				
CITY-ST-ZIP	NEW YORK, NY 10019		CITY-ST			Hgts., IL				
TITLE	VP	™ Delete	TITLE	VP)		☐ Change	Addition		
NAME	TAO, KOTA	e	NAME	ADDRESS 12	AMOTO, E	IIROMITSU ie of the .	Americas			
STREET ADDRESS CITY+ST-ZIP	1285 AVENUE OF THE AMERICA NEW YORK, NY 10019	13	STREET			NY 10019	nmer reas			
TITLE	VP	Delete	TITLE	Т			☐ Change	Addition		
NAME	FARLEY, JOHN L		NAME	SH	IIOZAKI.	TAKAHIRO	Amawia			
STREET ADDRESS CITY-ST-ZIP	1285 AVENUE OF THE AMERICA NEW YORK, NY 10019	. S	STREET CITY-ST			e of the A	Americas			
	1.12.17 1.0.13,117 10010			- 116			I further continue that the			

12. Thereby 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.

changed, or on all attachment with an address, with an when the	з впромегеа.		
SIGNATURE:	- Tetsuo Hosohara	4/25/05	(212)397-5453
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		