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### FOREIGN PROFIT QUALIFICATION

Citizen Watch Company of America, Inc.

Certificate of Status	0
Certified Copy	0
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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. I SO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

*Inc.," "Co.," "	Carp," "Inc," "Co," or "Corp.")			
(If name unava	ilable in Florida, enter alternate corporate na	me adopted for th	e purpose of transacting business in Florid	ia)
2. California		3. 95-2934490		<del></del>
	y under the law of which it is incorporated)		(FEI number, if applicable)	
4. 04/01/1975		5. Perpetual		<u> </u>
(Da	te of incorporation)	(Duration: )	ear corp. will cease to exist or "perpetual	<sup>4</sup> )
6. 03/01/2004				_
(Date first trans	acted business in Florids. If corporation has (SEE SECTIONS 607.1	not transacted bu 501, 607.1502 and	siness in Florida, insert "upon qualificatio 1817.155, P.S.)	a.'')
7. 1000 West 190	th Street, Torrance, CA 90502			
	(Principal office:	iddress)		- <del>-</del> -
same	(C)		***************************************	_ 🖫
	(Current mailing			
				<u>_</u> _
e all legal pumo	ses	2011,023)		<u>-</u>
	ses (s) of corporation authorized in home state o		nied out in state of Florida)	-I, AM 10
(Purpose		r country to be ca		04 Jiji -4 M10: 25
(Purpose	(s) of corporation authorized in home state of	r country to be ca		-1, AM 10: 25
(Purpose  9. Name and st.  Name:	(s) of corporation authorized in home state of reet address of Florida registered agen	r country to be ca		-1, AM 10: 25
(Purpose  9. Name and st.  Name:	(s) of corporation authorized in home state of reet address of Florida registered agen  CT Corporation System	r country to be can t: (P.O. Box or ine Island	Mail Drop Box <u>NOT</u> acceptable)	-1, MH10: 25
9. Name and <u>st</u> Name:	(s) of corporation authorized in home state of reet address of Florida registered agen CT Corporation System  c/o CT Corporation System, 1200 South P	r country to be can t: (P.O. Box or ine Island		-1, MH10: 25

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS SEE ATTACHMENT		
Chairman: Noritsugu Iwata		
Address: 1000 West 190th Street		
Torrance, CA 90502		
Vice Chairman:		
Address:	<del></del>	
Director: Akihiko Suzuki		
Address: 1000 West 190th Street		
Тоттяпсе, СА 90502-		
Director: Tsuneo Nagai		
Address: 1000 West 190th Street		<u></u>
Torrance, CA 90502	1,40	Sivi
B. OFFICERS SEE ATTACHMENT		INSION OF
President: Laurence R. Grunstein	+	
Address: 1000 West 190th Street		CORPORATIONS
Torrance, CA 90502	25	ATIO
Vice Prosident: John B. Forbes		Ö,
Address: 1000 West 190th Street		
Torrance, CA 90502		_
Secretary: Takahiro Haruyama	, <u></u>	_
Address: 1000 West 190th Street Torrance, CA 90502	<del></del>	
Treasurer: Takahiro Haruyama		_
Address: 1000 West 190th Street Torrance, CA 90502		
NOTE: If necessary, you hav attach an addendum to the application listing additional officers and/or directors.		
(Signature of Director or Officer listed in number 12 of the application)		_
4. David B. Perlman, Vice President  (Typed or printed name and conscitu of name distribution)		_
(Typed or printed name and capacity of person signing application)		

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Attachment to Arizona

#### Officers & Directors

Full Name:
 Officer/Director:
 Business Address:
 City:

City: State: ZIP Code:

Full Name:
 Officer/Director:
 Business Address:
 City:
 State:
 ZIP Code;

3. Pull Name:
Officer/Director:
Business Address: -

~ City:
State:
ZIP Code:

4. Full Name:
Officer/Director:
Business Address:
City:
State:
ZIP Code:

5. Full Name:
Officer/Director:
Business Address:
City:
State:
ZIP Code:

6. Full Name:
Officer/Director:
Business Address:
City:
State:

7. Full Name:
Officer/Director:
Business Address:
City:
State:

ZIP Code:

8. Full Name:
Officer/Director:
Business Address:
City:
State:

ZIP Code:

ZIP Code:9. Pull Name: Officer/Director: Nontsugu Iwata Officer, Director 1000 West 190th Street Torrance CA 90502

Laurence R. Grunstein Officer 1000 West 190th Street Torrance CA 90502

John B. Forbes Officor 1000 West 190th Street Torrance CA 90502

Carl A. Mielke Officer 1000 West 190th Street Torrance CA 90502

James W Keenan Officer 1000 West 190th Street Torrance CA 90502

Takahiro Haruyama Officer 1000 West 190th Street Torrance CA 90502

Akira Okubo Officer 1000 West 190th Street Torrance CA 90502

Michael Calev Officer 1000 West 190th Street Torrance CA 90502

David B. Perlman Officer OF JUN -4 AM 10: 2

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Business Address:

City: State: ZIP Code: 1000 West 190th Street Torrance

CA 90502

10. Full Name:
Officer/Director:
Business Address:

City: State: ZJP Code: Stuart B. Zuckerman Officer 1000 West 190th Street Torrance

CA 90502

DIVISION OF CORPORATIONS
OF THIS AM 10: 25

CT CORPORATION

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#### SECRETARY OF STATE

# CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the 1st day of April, 1975, CITIZEN WATCH COMPANY OF AMERICA, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 29, 2004.

KEVIN SHELLEY Secretary of State

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