2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005440

Entity Name: KONICA MINOLTA SYSTEMS LABORATORY, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 295 WAYMONT CT., STE 109 LAKE MARY, FL 32746 **Current Mailing Address: New Mailing Address:** 301 VELOCITY WAY FOSTER CITY, CA 94404 FEI Number: 77-0465197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete () Change () Addition SENSUI, KIYOSHI Name: Name: 5701 SKYLAB RD., 2ND FL Address: Address: City-St-Zip: HUNTINGTON BEACH, CA 92647 City-St-Zip: VΡ Title: Title: () Delete () Change () Addition Name: TOMITA, HIROSHI Name: 301 VELOCITY WAY Address: Address: FOSTER CITY, CA 94404 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete () Change () Addition CUPKA, BRIAN Name: Name: 100 WILLIAMS DR Address: Address: City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: Title: TREA () Delete Title: () Change () Addition KURIBAYASHI, TADASHI Name: Name: Address: 100 WILLIAMS DR Address: City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: Title: VC Title: () Delete () Change () Addition IMAZATO, KATSUNOBU Name: Name: C/O 301 VELOCITY WAY Address: Address: City-St-Zip: FOSTER CITY, CA 94404 City-St-Zip: () Delete Title: Title: () Change () Addition HARAGUCHI, JUN Name: Name: 100 WILLIAMS DR Address: Address: City-St-Zip: City-St-Zip: RAMSEY, NJ 07446

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HIROSHI TOMITA VP 05/01/2007