

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address, please.****

Email Address: _____

**CORPORATION REINSTATEMENT
KURARAY AMERICA, INC.**

Certificate of Status	0
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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F09000005195

1. Corporation Name
KURARAY AMERICA, INC.

2. Principal Office Address - No P.O. Box #
2625 BAY AREA BLVD SUITE 300

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Houston, TX

City & State

Zip Country
77058

Zip Country

REINSTATEMENT 10

CRS 2001 (8/10)

4. Date Incorporated or Qualified
To Do Business in Florida 12/24/2009

5. FEI Number 134119995
 Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
C T CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.

City State Zip Code
PLANTATION FL 33324

\$10/4

8. I, being appointed the registered agent of the above named corporation, do hereby accept the obligations of section 607.0505 or 617.0503, F.S.
Signature of Registered Agent: *[Signature]* Chris McNeair, Assistant Secretary
Date: 10/4/10

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	see attached		

10. E-mail Address: hiroschi.fukui@kurarayamerica.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 207.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.
SIGNATURE: *[Signature]* Hajime Suzuki, Secretary
Date: 10/4/2010 2:22
Daytime Phone #

Director/Officer List

Director

<u>Name</u>	<u>Address</u>
Abe Kenichi	2625 Bay Area Blvd., Suite 300 Houston, TX, 77058
Hideo Ohi	1-1-3 Otemachi, Chiyoda-ku, Tokyo, 100-8115, Japan
Hajime Suzuki	2625 Bay Area Blvd., Suite 300 Houston, TX, 77058

Officer

Office

President/
President of Trading
Business Unit

<u>Name</u>	<u>Address</u>
Abe Kenichi	2625 Bay Area Blvd., Suite 300 Houston, TX, 77058

Secretary

Hajime Suzuki	2625 Bay Area Blvd., Suite 300 Houston, TX, 77058
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Treasurer

Kunihiro Kawanishi	2625 Bay Area Blvd., Suite 550 Houston, TX 77058
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President of
EVAL Business Unit

George Avdey	2625 Bay Area Blvd., Suite 300 Houston, TX, 77058
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President of
SEPTON Business Unit/
Chief Compliance Officer

Robert Murphy	2625 Bay Area Blvd., Suite 300 Houston, TX 77058
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Deputy Compliance
Officer

Hiroshi Fukuizumi	11414 Choate Rd. Pasadena, Texas 77507
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