

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F53762 (3)

1. Corporation Name

AIWA DATA PRODUCTS SERVICES, INC.

AIWA RAID TECHNOLOGY, INC.

Principal Place of Business

Mailing Address

6500 EAST ROGERS CIRCLE  
BOCA RATON FL 33487  
US

6500 EAST ROGERS CIRCLE  
BOCA RATON FL 33487  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1981

4. FEI Number

59-2137829

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CECERE, TONY  
6500 EAST ROGERS CIRCLE  
BOCA RATON FL 33487

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent and title is acceptable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TAKAZAWA, MAKOTO	
STREET ADDRESS	1-2-11 IKENOHATA, TAITO-KU	
CITY-ST-ZIP	TOKYO, JAPAN FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	CECERE, TONY	
STREET ADDRESS	6500 EAST ROGERS CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DEIERLEIN, GARY	
STREET ADDRESS	6500 EAST ROGERS CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HASHIMOTO, KOICHI	
STREET ADDRESS	1-2-11 IKENOHATA, TAITO-KU	
CITY-ST-ZIP	TOKYO JA	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	YAMAMOTO, YUKIO	
STREET ADDRESS	800 CORPORATE DR.	
CITY-ST-ZIP	MAHWAH NJ 07430	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ISHII, YOSHIKAZU	
STREET ADDRESS	800 CORPORATE DRIVE	
CITY-ST-ZIP	MAHWAH NJ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	FUJINAMI, NORIHIKO	
13 STREET ADDRESS	6500 EAST ROGERS CIRCLE	
14 CITY-ST-ZIP	BOCA RATON, FL 33487	
21 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	GERALD SMITH	
23 STREET ADDRESS	6500 EAST ROGERS CIRCLE	
24 CITY-ST-ZIP	BOCA RATON, FL 33487	
31 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	TAKASHI SHIMADA	
33 STREET ADDRESS	6500 EAST ROGERS CIRCLE	
34 CITY-ST-ZIP	BOCA RATON, FL 33487	
41 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	TAKASHI OKADA	
43 STREET ADDRESS	1-2-11 IKENOHATA, TAITO-KU	
44 CITY-ST-ZIP	TOKYO, JAPAN	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE	600002532126	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	-05/21/98--01096--011	
63 STREET ADDRESS	***150.00	
64 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)