

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000000928 (1)

1. Corporation Name

EDO JAPAN DEVELOPMENT CORPORATION



Principal Place of Business

602 MANITOU ROAD S.E.  
CALGARY, ALBERTA T2G 4C5.CAN

Mailing Address

602 MANITOU ROAD S.E.  
CALGARY, ALBERTA T2G 4C5.CAN

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Ryan Swanson & Cleveland

22 City & State

27 1201 Third Ave., #3400

23 Zip

Country

28 Seattle, WA 98101-3034

24 Zip

Country

29 98101-3034

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 N. MAGNOLIA STREET  
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified

02/24/1994

3a. Date of Last Report

02/08/1995

4. FEI Number

91-1528715

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 date of appointment

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

1. NAME	PD IKUTA, SUSUMU	<input type="checkbox"/> DELETE
2. STREET ADDRESS	602 MANITOU ROAD S.E.	
3. CITY - ST - ZIP	CALGARY, ALBERTA CANADA	
4. TITLE	SD	<input type="checkbox"/> DELETE
5. NAME	URASAKI, MASA	
6. STREET ADDRESS	602 MANITOU ROAD S.E.	
7. CITY - ST - ZIP	CALGARY, ALBERTA CANADA	<input checked="" type="checkbox"/> DELETE
8. TITLE		
9. NAME		
10. STREET ADDRESS		
11. CITY - ST - ZIP		<input type="checkbox"/> DELETE
12. TITLE		
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81. NAME		
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83. CITY - ST - ZIP		<input type="checkbox"/> DELETE
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86. STREET ADDRESS		
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90. STREET ADDRESS		
91. CITY - ST - ZIP		<input type="checkbox"/> DELETE
92. TITLE		
93. NAME		
94. STREET ADDRESS		
95. CITY - ST - ZIP		<input type="checkbox"/> DELETE
96. TITLE		
97. NAME		
98. STREET ADDRESS		
99. CITY - ST - ZIP		<input type="checkbox"/> DELETE
100. TITLE		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE	VP of Finance / Administration	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. 2. NAME	Judy DeR	
3. 3. STREET ADDRESS	602. Manitou Rd SE	
4. 4. CITY - ST - ZIP	Calgary, Alberta	
5. 5. TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6. 6. NAME	Teruko Ikuta	
7. 7. STREET ADDRESS	602 Manitou Road S.E.	
8. 8. CITY - ST - ZIP	Calgary, Alberta T2G 4C5 CANADA	
9. 9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. 10. NAME		
11. 11. STREET ADDRESS		
12. 12. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13. 13. TITLE		
14. 14. NAME		
15. 15. STREET ADDRESS		
16. 16. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
17. 17. TITLE		
18. 18. NAME		
19. 19. STREET ADDRESS		
20. 20. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
21. 21. TITLE		
22. 22. NAME		
23. 23. STREET ADDRESS		
24. 24. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
25. 25. TITLE		
26. 26. NAME		
27. 27. STREET ADDRESS		
28. 28. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
29. 29. TITLE		
30. 30. NAME		
31. 31. STREET ADDRESS		
32. 32. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
33. 33. TITLE		
34. 34. NAME		
35. 35. STREET ADDRESS		
36. 36. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
37. 37. TITLE		
38. 38. NAME		
39. 39. STREET ADDRESS		
40. 40. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
41. 41. TITLE		
42. 42. NAME		
43. 43. STREET ADDRESS		
44. 44. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
45. 45. TITLE		
46. 46. NAME		
47. 47. STREET ADDRESS		
48. 48. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
49. 49. TITLE		
50. 50. NAME		
51. 51. STREET ADDRESS		
52. 52. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
53. 53. TITLE		
54. 54. NAME		
55. 55. STREET ADDRESS		
56. 56. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
57. 57. TITLE		
58. 58. NAME		
59. 59. STREET ADDRESS		
60. 60. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
61. 61. TITLE		
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63. 63. STREET ADDRESS		
64. 64. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
65. 65. TITLE		
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67. 67. STREET ADDRESS		
68. 68. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
69. 69. TITLE		
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71. 71. STREET ADDRESS		
72. 72. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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75. 75. STREET ADDRESS		
76. 76. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
77. 77. TITLE		
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79. 79. STREET ADDRESS		
80. 80. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
81. 81. TITLE		
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83. 83. STREET ADDRESS		
84. 84. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
85. 85. TITLE		
86. 86. NAME		
87. 87. STREET ADDRESS		
88. 88. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
89. 89. TITLE		
90. 90. NAME		
91. 91. STREET ADDRESS		
92. 92. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
93. 93. TITLE		
94. 94. NAME		
95. 95. STREET ADDRESS		
96. 96. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
97. 97. TITLE		
98. 98. NAME		
99. 99. STREET ADDRESS		
100. 100. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Judy - DeR

Date

Daytime Phone #

403.287-3822

CR2E034 (12/95)