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Feb 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F94000001965 (2)

1. Corporation Name  
EDO JAPAN, INC.

Principal Place of Business  
602 MANITOU ROAD S.E.  
CALGARY, ALBERTA T2G 4C5 CANAD-A

Mailing Address  
1201 3RD AVE  
STE 3400  
SEATTLE WA 98101-3034  
US



2. Principal Place of Business  
21 4838 - 32nd Street S.E.

2a. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc.

22 City & State  
23 Calgary, Alberta

27 City & State

24 Zip T2B 2S6 25 Country CANADA

29 Zip 30 Country

3. Date Incorporated or Qualified  
04/15/1994

3a. Date of Last Report  
02/01/1996

4. FEI Number  
98-0116950

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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYE ST  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name Corporation Services Company  
82 Street Address (P.O. Box Number is Not Acceptable)  
1201 Hays Street

84 City Tallahassee FL 85 Zip Code 32301

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 Robyn Repass Robyn R. Repass Asst. Secretary 01-15-97  
Signature of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	CP	<input type="checkbox"/> DELETE
NAME	IKUTA, SUSUMU	
STREET ADDRESS	602 MANITOU ROAD SE	
CITY-ST-ZIP	CALGARY, ALBERTA T2G 4C5 CANAD-A	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	IKUTA, TERUKO	
STREET ADDRESS	602 MANITOU ROAD SE	
CITY-ST-ZIP	CALGARY, ALBERTA T2G 4C5 CANAD-A	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	IKUTA, MAKOTO	
STREET ADDRESS	602 MANITOU ROAD SE	
CITY-ST-ZIP	CALGARY, ALBERTA T2G 4C5 CANAD-A	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DER, JUDY	
STREET ADDRESS	602 MANITOU ROAD SE	
CITY-ST-ZIP	CALGARY AL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	URASAKI, MASA	
STREET ADDRESS	602 MANITOU ROAD SE	
CITY-ST-ZIP	CALGARY AL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Ikuta, S.K.	
1.3 STREET ADDRESS	4838 - 32nd Street S.E.	
1.4 CITY-ST-ZIP	Calgary, Alberta T2B 2S6 CANADA	
2.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Der, Judy	
2.3 STREET ADDRESS	4838 - 32nd Street S.E.	
2.4 CITY-ST-ZIP	Calgary, Alberta T2B 2S6 CANADA	
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Ikuta, Teruko	
4.3 STREET ADDRESS	4838 - 32nd Street S.E.	
4.4 CITY-ST-ZIP	Calgary, Alberta T2B 2S6 CANADA	
5.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Ikuta, Makoto	
5.3 STREET ADDRESS	4838 - 32nd Street S.E.	
5.4 CITY-ST-ZIP	Calgary, Alberta T2B 2S6 CANADA	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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.

SIGNATURE: S. K. IKUTA SIGNATURE REQUIRED [Signature] 9022/42403) 215-8800  
Signature and typed or printed name of signing officer or director Date Daytime Phone

CR2E034 (9/96)