


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

FILED

**May 01 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *F 95000000 2352*

1. Corporation Name **FUJINON INC.**

Principal Place of Business Mailing Address

**10 High Point Drive
Wayne, NJ 07470-7434**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	10 High Point Drive	26	Same	1973	5/30/96
Suite, Apt. #, etc		Suite, Apt. #, etc		4. FEI Number	Applied For
				13-2648718	Not Applicable
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>	
Wayne, NJ				\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
07470-7434				\$5.00 May Be Added to Fees	
Country		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
USA					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
The Prentice-Hall Corporation System, Inc. 1201 Hays Street Tallahassee, FL 32301 USA				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 fee if applicable) (NOTE: Registered Agent signature required when translating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shoichi Takada	12 NAME	
STREET ADDRESS	10 High Point Drive	13 STREET ADDRESS	
CITY-ST-ZIP	Wayne, NJ 07470-7434	14 CITY-ST-ZIP	
TITLE	Exec. Vice President <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shigehide Tode	22 NAME	
STREET ADDRESS	10 High Point Drive	23 STREET ADDRESS	
CITY-ST-ZIP	Wayne, NJ 07470-7434	24 CITY-ST-ZIP	
TITLE	Secretary <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jiro Murase	32 NAME	
STREET ADDRESS	Havemeyer Road	33 STREET ADDRESS	
CITY-ST-ZIP	Ardasley-on-Hudson, NY 10503	34 CITY-ST-ZIP	
TITLE	Treasurer <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Shoichi Takada	42 NAME	
STREET ADDRESS	10 High Point Drive	43 STREET ADDRESS	
CITY-ST-ZIP	Wayne, NJ 07470-7434	44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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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. Takada* **4/29/97** (201) 633-5600

CR2E034 (9/96)