

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra P. Martinez
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000004003 (8)

1. Corporation Name

ANSUTECH, INC.

Principal Place of Business

168 KEYSTONE DR.
MONTGOMERYVILLE PA 18936

Principal Address

168 KEYSTONE DR.
MONTGOMERYVILLE PA 18936

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., etc.

26 Suite, Apt., etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 USA 25 USA 29 USA 30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.01(2) and 607.15(1), 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, thereby accepting the appointment as registered agent. I am familiar with and accept the obligation of Section 607.01(2), Florida Statute.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	[] DELETE
NAME	WILDEY, BRIAN R	
STREET ADDRESS	168 KEYSTONE DR.	
CITY, ST, ZIP	MONTGOMERYVILLE PA 18936	
TITLE	VDS	[] DELETE
NAME	NAGANO, MASATO	
STREET ADDRESS	168 KEYSTONE DR.	
CITY, ST, ZIP	MONTGOMERYVILLE PA 18936	
TITLE	D	[] DELETE
NAME	KITAJIMA, MITSUO	
STREET ADDRESS	6-2 KOJIMA-CHO	
CITY, ST, ZIP	KAWASAKI-KU, KANSAS JAPAN KS 18936	
TITLE	D	[] DELETE
NAME	SUZUKI, TAKESHI	
STREET ADDRESS	16-7-1 NISHI-SHINBASHI	
CITY, ST, ZIP	MINATO-KU, TOKYO, 105 JAPAN	
TITLE	[] DELETE	
NAME	[] DELETE	
STREET ADDRESS	[] DELETE	
CITY, ST, ZIP	[] DELETE	
TITLE	[] DELETE	
NAME	[] DELETE	
STREET ADDRESS	[] DELETE	
CITY, ST, ZIP	[] DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	[] CHANGE [] ADDITION
NAME	[] CHANGE [] ADDITION
STREET ADDRESS	[] CHANGE [] ADDITION
CITY, ST, ZIP	[] CHANGE [] ADDITION
TITLE	[] CHANGE [] ADDITION
NAME	[] CHANGE [] ADDITION
STREET ADDRESS	[] CHANGE [] ADDITION
CITY, ST, ZIP	[] CHANGE [] ADDITION
TITLE	[] CHANGE [] ADDITION
NAME	[] CHANGE [] ADDITION
STREET ADDRESS	[] CHANGE [] ADDITION
CITY, ST, ZIP	[] CHANGE [] ADDITION
TITLE	[] CHANGE [] ADDITION
NAME	[] CHANGE [] ADDITION
STREET ADDRESS	[] CHANGE [] ADDITION
CITY, ST, ZIP	[] CHANGE [] ADDITION

14. I do hereby certify that the information supplied herein is true and correct and does not qualify for the exemption stated in Section 119.07(3)(g), 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 executor 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 of this report in the format shown on this application.

SIGNATURE: Brian R. Wildey, President 3/15/96 (215)540-8486

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature

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