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Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000004715 (6)

1. Corporation Name  
FUJICOLOR PROCESSING, INC.



Principal Place of Business Mailing Address  
%FUJI PHOTO FILM USA, INC.  
555 TAXTER RD  
ELMSFORD NY 10523  
%FUJI PHOTO FILM USA, INC.  
555 TAXTER RD  
ELMSFORD NY 10523-2314

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 25 Country 29 Country 30 Country

3. Date Incorporated or Qualified 09/13/1996  
3a. Date of Last Report  
4. FEI Number 13-3902118  
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  
7. Trust Fund Contribution  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE DP DELETE  
NAME INOUE, OSAMU  
STREET ADDRESS %FUJI PHOTO FILM USA, INC, 555 TAXTER RD  
CITY-ST-ZIP ELMSFORD NY 10523  
TITLE S DELETE  
NAME FILE, JONATHAN E  
STREET ADDRESS %FUJI PHOTO FILM USA, INC, 555 TAXTER RD  
CITY-ST-ZIP ELMSFORD NY 10523  
TITLE T DELETE  
NAME TANAKA, NOBORU  
STREET ADDRESS %FUJI PHOTO FILM USA, INC, 555 TAXTER RD  
CITY-ST-ZIP ELMSFORD NY 10523  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE Change Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE Change Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE Change Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE Change Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE Change Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE Change 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: Jonathan E. File, Secretary 1/20/97 8100  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)