

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006207

FILED
Apr 11, 2006
Secretary of State

Entity Name: SOKKIA CREDIT CORPORATION

Current Principal Place of Business:

16900 W 118TH TERRACE
OLATHE, KS 66061

New Principal Place of Business:

Current Mailing Address:

P O BOX 577
OLATHE, KS 660510577 US

New Mailing Address:

16900 W 118TH TERRACE
OLATHE, KS 66061

FEI Number: 48-1187380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: YAMANAKA, EITOKU
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

Title: SEC () Delete
Name: HARA, COLIN
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

Title: TREA () Delete
Name: WALTER, JOHN L
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

Title: DIR () Delete
Name: YAMANAKA, EITOKU
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

Title: DIR. () Delete
Name: UENO, TATSUSHI
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

Title: DIR. () Delete
Name: OOKAWA, YUICHI
Address: 16900 W. 118TH TERRACE
City-St-Zip: OLATHE, KS 66061 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN L. WALTER

MR.

04/11/2006

Electronic Signature of Signing Officer or Director

Date