CR2E034 (5/99)

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, "MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED Katherine Herris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 DEC 15 AM 11: 27 DOCUMENT # F98000003878 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name KDD AMERICA, INC. Principal Place of Business Mailing Address 375 PARK AVENUE 375 PARK AVENUE NEW YORK NY 10152 NEW YORK NY 10152 DO NOT WRITE IN THE 3. Date incorporated or Qualified 07/08/1998 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 13-3522862 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes the current year Intangible Personal Property. Yes **₩**No 30 25 29 24 9. Name and Address of Current Registered Agent 19. Name and Address of New Registered Agent 61 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** 83 84 City 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 of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section of the statement of the purpose OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. CD <u>CD</u> TITLE 1.1 TITLE Change Addition DELETE Nariyoshi OHNO, KEIZO 1.2 NAME Tanaka NAME 1-8-1 OHTEMACHI, CHIYODA 2-3-2, Nishi-Shinjuku-ku, Tokyo, Japan .3 STREET ADDRESS STREET ADDRESS TOKYO JAPAN CITY-ST-ZIP 1.4 CITY-ST-ZIP PTD PTD Change Addition DELETE TITLE 2.1 TITLE HIRAI, HIROSHI Kinoto Naoki 2.2 NAME NAME 375 PARK AVENUE 375 Park Ave. STREET ADDRESS 2.3 STREET ADDRESS NEW YORK NY New York, NY 10172 CITY-ST-ZIP 2.4 City-ST-ZIP TITLE DELETE 3.1 TITLE VD. Change Addition KOJIMA, TOSHIRO Tashiro Tsutomu 1953 Gallows Rd., Suite 200 NAME 3.2 NAME 375 PARK AVENUE STREET ADDRESS 3.3 STREET ADDRESS NEW YORK NY Vienna, VA 22182 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE VSD DELETE 4.1 TITLE Change Addition 500003078285---12/22/99--01077--020 NOZAKA, AKIO NAME 4.2 NAME 375 PARK AVENUE STREET ADDRESS 4.3 STREET ADDRESS ****750.00 **NEW YORK NY** ****750.00 CITY-ST-ZIP 4.4 CITY-ST-ZIP S.1 TITLE TITLE DELETE Change Addition

14. I 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 eath; that I am an officer or director of the corporation or the receiver or drustee 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

8.3 STREET ADDRESS

8.4 CiTY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE: _

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FUJIOKA, SUSUMU

455 MARKET STREET

SAN FRANCISCO CA

535 MOUNTAIN AVENUE

ARAI, MAKOTO

MURRAY HILL NJ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

NOTO KINOTO

15/99 212-702-372

Change Addition