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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **F98000005529**

1. Corporation Name
SHIMIZU DEVELOPMENT (NEW YORK) INCORPORATED



Principal Place of Business: **800 WILSHIRE BLVD., STE 800 LOS ANGELES CA 90017**
 Mailing Address: **800 WILSHIRE BLVD., STE 800 LOS ANGELES CA 90017**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

10/02/1998

4. FEI Number

13-3289798

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 DELETE

TITLE: **PCD**
 NAME: **NISHIZAWA, ISATO**
 STREET ADDRESS: **800 WILSHIRE BLVD., STE 800**
 CITY-ST-ZIP: **LOS ANGELES CA**

TITLE: **VD**
 NAME: **TAKASAKI, YASUHIRO**
 STREET ADDRESS: **800 WILSHIRE BLVD., STE 800**
 CITY-ST-ZIP: **LOS ANGELES CA**

TITLE: **STD**
 NAME: **FUJISAWA, SHINICHIRO**
 STREET ADDRESS: **800 WILSHIRE BLVD., STE 800**
 CITY-ST-ZIP: **LOS ANGELES CA**

TITLE: **VD**
 NAME: **HOSHINO, HIROISHI**
 STREET ADDRESS: **800 WILSHIRE BLVD., STE 800**
 CITY-ST-ZIP: **LOS ANGELES CA**

TITLE: DELETE

TITLE: DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: Change Addition
 1.2 NAME: **AKIO ISHII**
 1.3 STREET ADDRESS: **800 WILSHIRE BLVD., STE. 800**
 1.4 CITY-ST-ZIP: **LOS ANGELES, CA 90017**

2.1 TITLE: Change Addition
 2.2 NAME: **KO SAKAMIZU**
 2.3 STREET ADDRESS: **800 WILSHIRE BLVD., STE. 800**
 2.4 CITY-ST-ZIP: **LOS ANGELES, CA 90017**

3.1 TITLE: Change Addition
 3.2 NAME: **STVD**
 3.3 STREET ADDRESS: **Shinichiro Fujisawa 800 WILSHIRE BLVD STE 800**
 3.4 CITY-ST-ZIP: **LOS ANGELES CA 90017**

4.1 TITLE: Change Addition

5.1 TITLE: Change Addition

6.1 TITLE: 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 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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHINICHIRO FUJISAWA

Date

Daytime Phone #

(213) 362-7500

CR2E034 (1/98)