## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000005031

Entity Name: TOSHIBA AMERICA BUSINESS SOLUTIONS, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
2 MUSICK IRVINE, CA 926181631 US						
Current Mailing Address:			New Mailing Address:			
2 MUSICK IRVINE, CA 926181631						
FEI Number: 3	33-0865305	FEI Number Applied For ( ) FEI Num	nber Not Applic	cable ( )	Certificat	e of Status Desired ( )
Name and Address of Current Registered Agent: Nam				ame and Address of New Registered Agent:		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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: ADDITIONS/CHANGES TO OFFICERS AND I						CERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P,D ()ETAYLOR, RICK 2 MUSICK IRVINE, CA 926	Delete 181631	Title: Name: Address: City-St-Zip:	P,D MATHEWS, I 2 MUSICK IRVINE, CA		) Addition
Title: Name: Address: City-St-Zip:	D () [ IKEDA, HIROYUH 2 MUSICK IRVINE, CA 926		Title: Name: Address: City-St-Zip:	D FUKAZAWA, 2 MUSICK IRVINE, CA		) Addition
Title: Name: Address: City-St-Zip:	D () [ TORU, UCHIIKE 2 MUSICK IRVINE, CA 926	Delete 181631	Title: Name: Address: City-St-Zip:		() Change(	) Addition
Title: Name: Address: City-St-Zip:	D () [ FUKAKUSHI, MA 2 MUSICK IRVINE, CA 926	SAHIKO	Title: Name: Address: City-St-Zip:		()Change(	) Addition
Title: Name: Address: City-St-Zip:	V,S ()[ MORAN, STEPHI 2 MUSICK IRVINE, CA 926		Title: Name: Address: City-St-Zip:		() Change(	) Addition
Title: Name: Address: City-St-Zip:	VCFO ()[ ALLEN, DESMON 2 MUSICK IRVINE, CA 926		Title: Name: Address: City-St-Zip:	VCFO TORCASO, M 2 MUSICK IRVINE, CA		) Addition

I hereby certify that the information supplied with this filing does not qualify 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: STEPHEN M MORAN V,S 04/25/2008