FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 11 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G13632 (6)

1. Corporation Name

SEIKAGAKU AMERICA, INC.

Principal Place of Business	Mailing Address
30 WEST GUDE DRIVE. ~~SUITE 260 (20850)~~ ROCKVILLE MD 20850-1161	30 WEST GUDE DRIVE. ~~SUITE 260 (20850)~~ ROCKVILLE MD 20850-1161

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/16/1982	3a. Date of Last Report: 04/22/1994
4. FEI Number: 59-2246144	☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22 SUITE 260	Suite, Apt. #, etc.: 27 SUITE 260
City & State: 23	City & State: 28
Zip: 24 Country: 25	Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

MCKNIGHT, T. MICHAEL
433-FOURTH STREET NORTH
ST. PETERSBURG FL 33701

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	11 TITLE	☐ Change ☐ Addition
NAME	MIZUTANI, KENJI	12 NAME	
STREET ADDRESS	1-45-2, HIGASHI-ASAHINA, KANAZAWA-KU	13 STREET ADDRESS	
CITY-ST-ZIP	YOKOHAMA-SHI, KANAGAWA	14 CITY-ST-ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	NUKI, TETSURO	22 NAME	
STREET ADDRESS	#301 1-26-7 ADACHI	23 STREET ADDRESS	
CITY-ST-ZIP	ADACHI KU, TOKYO	24 CITY-ST-ZIP	
TITLE	~~V~~	31 TITLE	V ☒ Change ☐ Addition
NAME	~~YAMAMURA, NORIO~~	32 NAME	TAKASHI KATO
STREET ADDRESS	~~15706 BUENA VISTA DRIVE~~	33 STREET ADDRESS	14037 GALLOP TERRACE
CITY-ST-ZIP	~~ROCKVILLE MD 20855~~	34 CITY ST ZIP	GERMANTOWN, MD 20874
TITLE	T	41 TITLE	☐ Change ☐ Addition
NAME	FUJIWARA, TAKESHI	42 NAME	
STREET ADDRESS	1353-7 MUTSUURA CHO KANAZAWA KU	43 STREET ADDRESS	
CITY-ST-ZIP	YOKOHAMA-SHI, KANAGAWA	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Takashi Kato TAKASHI KATO, EXEC. V-P 04/06/95 301 424-0546
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #

0474760 VP