


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K50126 (7)					
1. Corporation Name EAST MEC, INC.					
Principal Place of Business C/O JOHN SPUCHEES, ESO., DEWEY BALLANTINE 1301 AVENUE OF THE AMERICAS NEW YORK NY 10019-6092			Mailing Address C/O JOHN SPUCHEES, ESO., DEWEY BALLANTINE 1301 AVENUE OF THE AMERICAS NEW YORK NY 10019-6092		



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/08/1988	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0087265	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HAMILTON, RUSSEL T. 5355 TOWN CENTER ROAD BOCA RATON FL 33486				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YAMAZAKI, TAKETO			1.2 NAME	Tan, Eiji		
STREET ADDRESS	30 ROCKEFELLER PLAZA			1.3 STREET ADDRESS	30 Rockefeller Plaza		
CITY - ST - ZIP	NEW YORK NY			1.4 CITY - ST - ZIP	New York, NY 10112		
TITLE	VP	<input type="checkbox"/> DELETE		2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AMANO, MASAMI			2.2 NAME	Yotsuzuka, Yutaro		
STREET ADDRESS	30 ROCKEFELLER PLAZA			2.3 STREET ADDRESS	30 Rockefeller Plaza		
CITY - ST - ZIP	NEW YORK NY			2.4 CITY - ST - ZIP	New York, NY 10112		
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TAKAGI, SHIGERU			3.2 NAME			
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325			3.3 STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			3.4 CITY - ST - ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NAKABAYASHI, MASAHIKO			4.2 NAME			
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325			4.3 STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			4.4 CITY - ST - ZIP			
TITLE	PD	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KAZUHIKO ARAHATA			5.2 NAME			
STREET ADDRESS	30 ROCKEFELLER PLAZA, SUITE 4325			5.3 STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			5.4 CITY - ST - ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAIGO, TERUHISA			6.2 NAME			
STREET ADDRESS	30 ROCKEFELLER PLAZA SUITE 4325			6.3 STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			6.4 CITY - ST - ZIP			

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.

SIGNATURE _____ KAZUHIKO ARAHATA 1/16/98 1212 608 8800

CR2E034 (10/97)