

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

PROFIT CORPORATION ANNUAL REPORT 1999



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

FILED Jun 29, 1999 8:00 am Secretary of State

06-29-1999 90005 003 ***750.00

DOCUMENT # L59902

1. Corporation Name
PARCEL JH DEVELOPMENT, INC.



Principal Place of Business 1285 AVENUE OF THE AMERICAS, 36TH FLOOR C/O TOMEN AMERICA, INC NEW YORK NY 10019 US	Mailing Address 1285 AVENUE OF THE AMERICAS, 36TH FLOOR C/O TOMEN AMERICA, INC NEW YORK NY 10019 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/26/1990	4. FEI Number 13-3578017	Applied For <input type="checkbox"/> Not Applicab
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	KOBAYASHI, TADASHI	
STREET ADDRESS	1285 AVENUE OF THE AMERICAS, 36TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10019	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MCCARTHY, JAMES	
STREET ADDRESS	1285 AVENUE OF THE AMERICAS, 36TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10019	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MARAIA, JOHN	
STREET ADDRESS	1285 AVENUE OF THE AMERICAS, 36TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10019	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MUSHIKA, HIDEKI	
STREET ADDRESS	1285 AVENUE OF THE AMERICAS, 36TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10019	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Pres	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
1.2 NAME	McCarthy, James	
1.3 STREET ADDRESS	1285 Avenue of the Americas, 36th Fl	
1.4 CITY-ST-ZIP	New York, NY 10019	
2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addit
2.2 NAME	Umeki, Atsuo	
2.3 STREET ADDRESS	1285 Avenue of the Americas, 36 Fl	
2.4 CITY-ST-ZIP	New York, NY 10019	
3.1 TITLE	Treas	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
3.2 NAME	Mushika, Hideki	
3.3 STREET ADDRESS	1285 Avenue of the Americas, 36 Fl	
3.4 CITY-ST-ZIP	New York, NY 10019	
4.1 TITLE	Sec	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
4.2 NAME	Maraia, John	
4.3 STREET ADDRESS	1285 Avenue of the Americas, 36 Fl	
4.4 CITY-ST-ZIP	New York, NY 10019	
5.1 TITLE	Dir	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addit
5.2 NAME	(See attached list for Directors)	
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addit
6.2 NAME		
6.3 STREET ADDRESS		
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, with all other like empowered

SIGNATURE: **James McCarthy, President** *James McCarthy* 4/13/99 212 397 5808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



L59902
580541-90005-7

LIST OF DIRECTORS For Florida Subsidiary Companies

Parcel J-I Development, Inc.

Director: McCarthy, James
c/o Tomen America, Inc.
1285 Avenue of the Americas, 36 Fl
New York, NY 10019

Director: Oshima, Shuzo
c/o Tomen America, Inc.
1285 Avenue of the Americas, 36 Fl
New York, NY 10019

Director: Maraia, John
c/o Tomen America, Inc.
1285 Avenue of the Americas, 36 Fl
New York, NY 10019