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FLORIDA
ANNUAL REPORT
1995

DOCUMENT # P00778 (1)

HITACHI INSTRUMENTS, INC.

3100 N FIRST ST
SAN JOSE CA 95134

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SAN JOSE CA 95134

ATTACHED
FILED

1 AM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3. 02/01/1984
3a. 03/30/1994
4. FI Number 94-2220297 — 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. The corporation has elected to be exempt tax under S. 1120(S) Florida Statutes — Yes / No

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

11. Pursuant to the provisions of Section 607.0505 of the Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida and the name of the registered agent and the registered office shall be identical to the corporation's principal place of business. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BUONAIUTO, VALENTINE
ADDRESS	3356 NEWTON DRIVE
CITY	MT VIEW CA
TITLE	S
NAME	CHAVEZ, ANTHONY
ADDRESS	158 GRANADA DRIVE
CITY	MT VIEW CA
TITLE	C
NAME	FUKUDA, KENJI
ADDRESS	CHIYODA-KU
CITY	TOKYO, JAPAN
TITLE	D
NAME	HONKAWA, TADASHI
ADDRESS	HITACHI LTD., IIS ICHIGE
CITY	KATSUTA IB
TITLE	D
NAME	NISHIKAWA, HIROFUM
ADDRESS	24-14 NISHI-SHIMBASHI
CITY	TOKYO, JAPAN
TITLE	D
NAME	~~TOHYAMA, SHIGEO~~
ADDRESS	~~HITACHI LTD., 882 ICHIGE~~
CITY	~~KATSUTA IB~~

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 19

TITLE	Director
NAME	Taro Nogami
ADDRESS	3100 N. First Street
CITY	San Jose, Ca 95134
TITLE	Shuji Nakanishi
NAME	HAL, 50 Prospect Ave
ADDRESS	Tarrytown, N.Y. 10591

14. I hereby certify that the information supplied with this report, including any attached additional pages, is true and complete to the best of my knowledge and belief. I further certify that the information indicated on the attached additional pages is true and complete 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 of the attached amendment.

SIGNATURE: [signature] 4/28/95 (405) 432 0520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0480320 FP