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 May 11, 1999 8:00 am Secretary of State

05-11-1999 90041 024 ***150.00

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Corporation Name

AUCCUM BAIAL AMEDICAN CODDODATION

NISSHO IWAI AWENICAN CONF	ONATION	
Principal Place of Business	Mailing Address	
1211 AVENUE OF THE AMERICAS NEW YORK NY 10036	1211 AVENUE OF THE AMERICAS NEW YORK NY 10036	DO NOT WRITE IN TH
		3. Date Incorporated or Qualifed 07/02/1986
Principal Place of Business     The Principal Place of Business	2a. Mailing Address	4. FEI Number 13-5610360
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution
Zip Country	Zip Country	This corporation owes the current year     Personal Property Tax.
9. Name and Address of 0	Current Registered Agent	10. Name and Address of New Registere

DO NOT WRITE IN THIS SPACE

Fee f	Required _	
•	May Be to Fees	
ntangible		٦
Yes	□No _	
d Agent		]
		٦

Applied For

Not Applicable \$8.75 Additional

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301

	10. Name and Address of New Registered Agent	
31	Name	
32	Street Address (P.O. Box Number is Not Acceptable)	•
33		•
, d	City 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 ai	m familiar with, and accept the obligations of,	Section 607.0505, Florid	a Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Re	egistered Agent signature re	equired when reinstating)	DATE	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTOR	RS IN 12
TITLE	CPD	☑ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	YOKOUCHI, AKIRA		1.2 NAME			
STREET ADDRESS	1211 AVE OF THE AMERICAS		1.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-SY-ZIP			
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	MINAMI, KENICHI		2.2 NAME			
STREET ADDRESS	1211 AVE OF THE AMERICAS		2.3 STREET ADDRESS			}
CITY-ST-ZIP	NEW YORK NY		2.4 CITY+ST-ZIP			
TITLE	VD .	☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME	KONDO, MASANOBU		3.2 NAME			Ì
STREET ADDRESS	1211 AVE OF THE AMERICAS		3.3 STREET ADDRESS			}
CITY-ST-ZIP	NEW YORK NY		3.4. CITY-ST-ZIP			
TITLE	V	☐ DELETE	4.1 TITLE	VP & TREASURER	🔀 Change	Addition
NAME	SATO, YOJI		4. 2 NAME			
STREET ADDRESS	1211 AVE OF THE AMERICAS		4.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY	· · · · · · · · · · · · · · · · · · ·	4.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME	HIRATA, YASUHIKO		5.2 NAME	/ KATSUHIKO` MASADA		
STREET ADDRESS	1211 AVE OF THE AMERICAS		5.3 STREET ADDRESS			
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-ST-ZIP			
πLE	VS	DELETE	6.1 TITLE		Change	☐ Addition
NAME	KOIKE, TOMOYUKI		6.2 NAME			
STREET ADDRESS	1211 AVE OF THE AMERICAS		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 embowered 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(212) 704-6606

CR2E034 (11/98)

## NISSHO IWAI AMERICAN CORPORATION LIST OF DIRECTORS AND OFFICERS AS OF APRIL 1, 1999 F.E.I.N. 13-5610360

545356-90041-24 (DO#PIX623

NAME	ADDRESS	S.S.#	DIRECTOR OFFICER	OFFICER	TITLE
YOSHISHIGE AIKEI	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	058-54-4377	YES	YES	PRESIDENT & C.E.O.
MASANOBU KONDO	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	065-44-6714	YES	YES	E.V.P. & CHIEF FIN'L OFFICER
MASAAKI SUGIHARA	100 GALLERIA OFFICENTRE, #221, SOUTHFIELD, MI 48034	067-56-3867	YES	YES	S.V.P.
KENICHI MINAMI	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	093-86-4919	YES	YES	S.V.P.
YUTAKA KASE	1211 S.W., FIFTH AVENUE, PORTLAND, OREGON 97204	538-72-6255	YES	YES	S.V.P.
KATSUHIKO MASADA	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	565-41-6763	YES	YES	S.V.P.
MICHAEL BRENDZEL	1211 AVENUE OF THE AMERICAS, NEW YORK, NY. 10036	138-38-5214	· NO	YES	S.V.P. & GENERAL COUNSEL
RAOUL DONATO	950 E. PACES FERRY RD, SUITE 2980, ATLANTA, GA 30326	058-40-7570	NO	YES	S.V.P.
MAMORU KIMURA	1055 WEST 7TH ST., SUITE 3200, LOS ANGELES, CA 90017	620-06-2399	YES	YES	S.V.P.
NOBUO SATO	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	104-62-3351	. NO	YES	S.V.P.
AKIHIRO KAWAKITA	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	560-06-9353	NO	YES	S.V.P.
TOMOYUKI KOIKE	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	461-57-6293	NO	YES	S.V.P. & SECRETARY
YOJI SATO	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	134-70-7251	NO	YES	V.P. & TREASURER
HIROSHI KOIDE	1055 WEST 7TH ST., SUITE 3200, LOS ANGELES, CA 90017	083-72-4397	NO	YES	V.P. & ASST. TREASURER
					& ASST. SECRETARY
JAMES MINNERLY	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	119-40-3635	NO	YES	A.V.P. & CONTROLLER
KOJI KAMIKO	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	632-38-3791	NO	YES	A.V.P. & ASST. TREASURER
EIICHI SHIMOMURA	1211 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	126-84-2822	NO	YES	A.V.P. & ASST. SECRETARY