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

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FILED
95 JUN 16 AM 8:31
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 15 PM 11:31

DOCUMENT # **P23361** **(9)**

1. Corporation Name

SHISEIDO COSMETICS (AMERICA) LTD. INC.

Principal Place of Business	Mailing Address
900 3RD AVENUE NEW YORK NY 10022 US	178 BAUER DRIVE OAKLAND NJ 37436 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/10/1989
3a. Date of Last Report: 05/01/1994

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

4. FEI Number: 13-2545265 ☐ 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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: The Prentice Hall Corp. Systems Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 1201 Hayes Street
83: Suite 105
84 City: Tallahassee FL 85 Zip Code: 32301

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEO	11 TITLE	Chief Operating Officer	☒ Change ☐ Addition
NAME	ABE, SADAO	12 NAME	Mr. Yuji Kishida	
STREET ADDRESS	900 3RD AVENUE	13 STREET ADDRESS	900 Third Avenue	
CITY-ST-ZIP	NEW YORK NY	14 CITY-ST-ZIP	New York, New York 10022	
TITLE	SD	21 TITLE	Secretary	☒ Change ☐ Addition
NAME	KATSUMI, SAITO	22 NAME	Mr. Yasushi Kunii	
STREET ADDRESS	900 3RD AVENUE	23 STREET ADDRESS	900 Third Avenue	
CITY-ST-ZIP	NEW YORK NY	24 CITY-ST-ZIP	New York, New York 10022	
TITLE	TD	31 TITLE		☐ Change ☐ Addition
NAME	TAKAHASHI, NOBUO	32 NAME		
STREET ADDRESS	178 BAUER DRIVE	33 STREET ADDRESS		
CITY ST ZIP	OAKLAND NJ	34 CITY-ST-ZIP		
TITLE	PD	41 TITLE		☐ Change ☐ Addition
NAME	KISHIDA, YUJI	42 NAME		
STREET ADDRESS	900 3RD AVENUE	43 STREET ADDRESS		
CITY ST ZIP	NEW YORK NY	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: _____ Treasurer 05/30/95 (201) 405-2261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000134 FP