2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25542

FILED Jan 19, 2004 Secretary of State

Entity Name: HITACHI MAXCO, LTD. CORPORATION

Current Principal Place of Business: New Principal Place of Business: C/O CORPORATION TRUST CENTER 1209 ORANGE STREET WILMINGTON, DE 19801 **Current Mailing Address: New Mailing Address:** 1630 COBB INTERNATIONAL BLVD KENNESAW, GA 31052 FEI Number: 58-1696371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ROBERTS, DOUGLAS A. ROBERTS, DOUGLAS A. Name: Name: 1850 N MILFORD CREEK LN 1850 N MILFORD CREEK LN Address: Address: MARIETTA, GA City-St-Zip: City-St-Zip: MARIETTA, GA 30008 Title: Title: () Delete (X) Change () Addition Name: ROBERTS, DOUGLAS A., Name: ROBERTS, DOUGLAS A 1850 N MILFORD CREEK LN 1850 N MILFORD CREEK LN Address: Address: City-St-Zip: MARIETTA, GA City-St-Zip: MARIETTA, GA 30008 () Delete Title: Title: () Change () Addition BANDO, MASAKUNI Name: Name: 3751 CARA LANE Address: Address: City-St-Zip: MARIETTA, GA 30062 City-St-Zip: Title: () Delete Title: () Change () Addition NEUWIRTH, ALAN Name: Name: Address: 101 PARK AVE. Address: City-St-Zip: NEW YORK, NY 10178 City-St-Zip: Title: Title: () Delete () Change () Addition Name: TAMURA, HIROSHI Name: SHING BLDG. 4-2. TOYO 2-CHROME Address: Address: City-St-Zip: KOTO-KU TOKYO JAPAN, City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE:	DOUGLAS A ROBERTS	Т	01/19/2004