## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Jul 13, 2000 8:00 am Secretary of State **DOCUMENT # P26459** 1. Entity Name ORIXGP INTRACOASTAL CORPORATION 07-13-2000 90015 045 \*\*\*550.00 Mailing Address Principal Place of Business 1177 AVENUE OF THE AMERICAS 1177 AVENUE OF THE AMERICAS 10TH FLOOR 10TH FLOOR NEW YORK NY 10036-2714 NEW YORK NY 10036 ИŜ US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3543246 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. П Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PD President ☐ Change ☐ Addition TITI F TITLE Delete ONO, YOSHIO Ono, Yoshio 1177 AVENUE OF THE AMERICAS, NAME NAME STREET ADDRESS STREET ADDRESS 1177 AVENUE OF THE AMERICAS CITY-ST-ZIP NEW YORK NY 10036 CITY-ST-ZIP NEW YORK NY 10036 ☐ Change ✓ Addition N Delete TITLE TITLE NAME TASHIRO, MASAAKI ISHIBASHI, KENSUKE NAME 1177 AVENUE OF THE AMERICAS STREET ADDRESS STREET ADDRESS 100 NORTH RIVERSIDE PLAZA NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60606 **X** Addition ☐ Change ■ Delete SECRETARY TITLE KC/ANAGE, SIAN. 1177 AVENUE OF THE AMERICAS -YAMAMOTO: SHIGEO:-MALIE STREET ADDRESS STREET ADDRESS 1177 AVENUE OF THE AMERICAS NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10036 Change X Addition Delete TITLE TITLE TREALRER KITAYAMA, HISAYUKI NAME NAME CICIO, WILLIAMS STREET ADDRESS STREET ADDRESS 1177 AVENUE OF THE AMERICAS 1177 AVENUE OF THE AMERICAS CITY-ST-ZIP NEW YORK NY 10036 CITY-ST-ZIE **NEW YORK NY 10036** X Delete ☐ Change X Addition TITLE TITLE AVP YCKOYAMA, HIDEAKI NAME YABU, NAOTO NAME STREET ADDRESS 100 NORTH RIVERSIDE PLAZA 100 NORTH RIVERSIDE PLAZA STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60606 CITY-ST-ZIP CHICAGO IL 60606

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPELOGREPHINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

6/20/00

(212) 739-1600

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Daytime Phone #

☐ Change

☐ Addition

CR2E034 (9/99)