

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P27376

1. Entity Name
NEC SOLUTIONS (AMERICA), INC.



Principal Place of Business
10850 GOLD CENTER DR #200
STE 200
RANCHO CORDOVA, CA 95670 US

Mailing Address
10850 GOLD CENTER DR #200
STE 200
RANCHO CORDOVA, CA 95670 US



01052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3112037

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPCO
NAME	IWANAMI, TOSHIMITSU
STREET ADDRESS	10850 GOLD CENTER DRIVE STE 200
CITY-ST-ZIP	RANCHO CORDOVA, CA 95670
TITLE	D
NAME	KOBAYASHI, KAZUHIKO
STREET ADDRESS	7-1 SHIBA 5 CHOME MINATO KV
CITY-ST-ZIP	TOKYO 108-8001 JAPAN,
TITLE	D
NAME	YOSHIDA, JUN
STREET ADDRESS	7-1 SHIBA 5 CHOME MINATO KV
CITY-ST-ZIP	TOKYO 108-8001 JAPAN,
TITLE	D
NAME	KAWAMURA, TOSHIRO
STREET ADDRESS	7-1 SHIBA 5 CHOME MINATO KV
CITY-ST-ZIP	TOKYO 108-8001 JAPAN,
TITLE	CFOS
NAME	TOGAWA, AKIRA
STREET ADDRESS	15 BUSINESS PARK WAY
CITY-ST-ZIP	SACRAMENTO, CA 95828
TITLE	C
NAME	SADOWSKI, TONY
STREET ADDRESS	1250 N ARLINGTON HTS ROAD
CITY-ST-ZIP	ITASCA, IL 60143

U000000183820
01/20/05-80005-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/05 916-436-5235
Date Daytime Phone #