

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

**CORPORATION ANNUAL REPORT 1995**

FLORIDA DEPARTMENT OF STATE  
Sandra E. Moorman  
Secretary of State  
DIVISION OF CORPORATIONS

95 MAR -1 PM 2:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P33261 (9)**

1. Corporation Name  
**MKK TECHNOLOGIES, INCORPORATED**

Principal Place of Business Mailing Address

39209 W. 6 MILE RD.  
STE. 204  
LIVONIA MI 48152

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STE. 204  
LIVONIA MI 48152

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **03/20/1991** 3a. Date of Last Report **07/20/1994**

4. FEI Number **95-3979679** 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

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

24 Zip 25 Country 28 Zip 30 Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	<b>PCEO</b>
NAME	<b>MIZUMI, TAKAO</b>
STREET ADDRESS	<b>39209 W. SIX MILE RD#204</b>
CITY - ST - ZIP	<b>LIVONIA MI</b>
TITLE	<b>VSCF</b>
NAME	<b>OKABE, SHOJI</b>
STREET ADDRESS	<b>700 S FLOWER ST, #1200</b>
CITY - ST - ZIP	<b>LOS ANGELES CA</b>
TITLE	<b>D</b>
NAME	<b>MAEDA, KENJI</b>
STREET ADDRESS	<b>10-26 FUJIMI 2-CHOME</b>
CITY - ST - ZIP	<b>CHIYODA-KU, TOK.,JAP</b>
TITLE	<b>D</b>
NAME	<b>ROPER, THOEDORE J.</b>
STREET ADDRESS	<b>515 S. FLOWER ST.</b>
CITY - ST - ZIP	<b>LOS ANGELES CA</b>
TITLE	<b>D</b>
NAME	<b>MAEDA, YASUJI</b>
STREET ADDRESS	<b>10-26 FUJIMI 2-CHOME</b>
CITY - ST - ZIP	<b>CHIYODA-KU, TOK.,JAP</b>
TITLE	<b>D</b>
NAME	<b>OKABE, MASATSUGU</b>
STREET ADDRESS	<b>10-26 FUJIMI 2-CHOME</b>
CITY - ST - ZIP	<b>CHIYODA-KU, TOK.,JAP</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>MOROOKA, I SAO</b>
3.3 STREET ADDRESS	<b>10-26 Fujimi 2-Chome</b>
3.4 CITY - ST - ZIP	<b>Chiyoda-Ku, Tokyo, Japan</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>yoshihara, AKIO</b>
6.3 STREET ADDRESS	<b>10-26 Fujimi 2-Chome</b>
6.4 CITY - ST - ZIP	<b>Chiyoda-Ku, Tokyo, Japan</b>

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 110.07(3)(k), Florida Statutes. I further certify 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: *Takao Mizumi*  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

2-9 '95 313-462-2230  
DATE TIME