

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State
03-05-2001 90358 044 ***150.00

DOCUMENT # P33898

1. Entity Name
FUJITSU-HCL SYSTEMS INC.

Principal Place of Business

**5429 LBJ FREEWAY
ATTN: TAX MANAGER
DALLAS TX 75240**

Mailing Address

**ATTN: A:AN WAIN
401 HACKENSACK AVE. 8TH FLOOR
HACKENSACK NJ 07601**

816357



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **75-2355667**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	MULINDER, AUSTIN	
STREET ADDRESS	5429 LBJ FREEWAY	
CITY-ST-ZIP	DALLAS TX 75240	
TITLE	VP	☐ Delete
NAME	THOMAS, JULIANO	
STREET ADDRESS	5429 LBJ FREEWAY	
CITY-ST-ZIP	DALLAS TX 75240	
TITLE	VSD	☐ Delete
NAME	WAIN, ALAN P	
STREET ADDRESS	401 HACKENSACK AVE	
CITY-ST-ZIP	HACKENSACK NJ 07601	
TITLE	VP	☒ Delete
NAME	KELLY, PETER	
STREET ADDRESS	5429 LBJ FREEWAY	
CITY-ST-ZIP	DALLAS TX 75240	
TITLE	VPFT	☐ Delete
NAME	MASON, PAUL	
STREET ADDRESS	5429 LBJ FREEWAY	
CITY-ST-ZIP	DALLAS TX 75240	
TITLE	C	☒ Delete
NAME	TODD, THOMAS K	
STREET ADDRESS	26 FINSBURY SQUARE	
CITY-ST-ZIP	LONDON EN ECSA1	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP/COO	☒ Change ☐ Addition
NAME	Nancy Daniels	
STREET ADDRESS	5429 LBJ Freeway	
CITY-ST-ZIP	Dallas, TX 75240	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	☐ Change ☒ Addition
NAME	Masa Kikuchi	
STREET ADDRESS	5429 LBJ Freeway	
CITY-ST-ZIP	Dallas, TX 75240	
TITLE	CFO/T	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	C	☐ Change ☒ Addition
NAME	Hidetoshi Shibagaki	
STREET ADDRESS	3065 Okada, A. sugi-shi	
CITY-ST-ZIP	Kanagawa, 243 Japan	

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)