

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

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34386 (3)
1. Corporation Name
YUASA-EXIDE, INC.



Principal Place of Business: **645 PENN ST. READING PA 19601**
Mailing Address: **645 PENN ST. READING PA 19601**

3. Date Incorporated or Qualified: **06/19/1991**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **95-2388156**
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: **2400 Bernville Road**
2a. Mailing Address: **2400 Bernville Road**
21. Suite, Apt. #, etc.:
22. City & State: **Reading, PA**
23. City & State: **Reading, PA**
24. Zip: **19605**
25. Country:
26. Suite, Apt. #, etc.:
27. City & State:
28. City & State:
29. Zip: **19605**
30. Country:

9. Name and Address of Current Registered Agent: **THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301**
10. Name and Address of New Registered Agent:
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83.
84. City:
85. Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YUASA, TERUHISA	1.2 NAME	
STREET ADDRESS	9728 ALBURTIS AVE.	1.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	SANTA FE SPRINGS CA	1.4 CITY-ST-ZIP	Reading PA 19605
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EHLERMAN, P. MICHAEL	2.2 NAME	
STREET ADDRESS	645 PENN ST.	2.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	READING PA	2.4 CITY-ST-ZIP	Reading PA 19605
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Executive Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TSUJI, SABURO	3.2 NAME	John Craig
STREET ADDRESS	9728 ALBURTIS AVE.	3.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	SANTA FE SPRINGS CA	3.4 CITY-ST-ZIP	Reading PA 19605
TITLE	TV <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILION, MICHEAL	4.2 NAME	
STREET ADDRESS	645 PENN ST.	4.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	READING PA	4.4 CITY-ST-ZIP	Reading PA 19605
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, BRUCE	5.2 NAME	
STREET ADDRESS	645 PENN ST.	5.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	READING PA	5.4 CITY-ST-ZIP	Reading PA 19605
TITLE	SV <input checked="" type="checkbox"/> DELETE	6.1 TITLE	Vice President, Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NAGATA, HISAYOSHI	6.2 NAME	Hiroshi Horuchi
STREET ADDRESS	645 PENN ST.	6.3 STREET ADDRESS	2400 Bernville Road
CITY-ST-ZIP	READING PA	6.4 CITY-ST-ZIP	Reading PA 19605

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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 4/24/96 610-208-1738

CR2E034 (12/95)