

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000087128

FILED
Jul 28, 2011
Secretary of State

Entity Name: SIGHTRON, INC.

Current Principal Place of Business:

100 JEFFREY WAY SUITE A
YOUNGSVILLE, NC 27596 US

New Principal Place of Business:

Current Mailing Address:

100 JEFFREY WAY SUITE A
YOUNGSVILLE, NC 27596 US

New Mailing Address:

FEI Number: 65-0456018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, PHILIP L
2000 GLADES ROAD
SUITE 208
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: ORR, ALAN
Address: 100 JEFFREY WAY SUITE A
City-St-Zip: YOUNGSVILLE, NC 27596 US

Title: D
Name: YAMANAKA, TORU
Address: NISHI-OCHIAI 3-9-19
City-St-Zip: SHINJUKU-KU, TOKYO, JP 1618570 JP

Title: D&O
Name: HAMADA, YOSHINOBU
Address: NISHI-OCHIAI 3-9-19
City-St-Zip: SHINJUKU-KU, TOKYO, JP 1618570 JP

Title: D
Name: KITAMURA, YOICHI
Address: NISHI OCHIAI 3-9-19
City-St-Zip: SHINJUKU-KU, TOKYO, JP 1618570 JP

Title: D
Name: ONO, AKIFUMI
Address: NISHI OCHIAI 3-9-19
City-St-Zip: SHINJUKU-KU, TOKYO, JP 1618570 JP

Title: D
Name: ITOH, MASATOSHI
Address: NISHI OCHIAI 3-9-19
City-St-Zip: SHINJUKU-KU, TOKYO, JP 1618570 JP

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: YOSHINOBU HAMADA

○

07/28/2011

Electronic Signature of Signing Officer or Director

_____ Date