2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 17, 2004 8:00 am **Secretary of State** DOCUMENT # S90208 1. Entity Name 02-17-2004 90049 037 ***150 00 PARCEL J-III DEVELOPMENT, INC. Principal Place of Business Mailing Address 1285 AVENUE OF THE AMERICAS, 36TH FLO 1285 AVENUE OF THE AMERICAS, 36TH FLO C/O TOMEN AMERICA, INC NEW YORK NY 10019 C/O TOMEN AMERICA, INC NEW YORK NY 10019 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 13-3636922 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zio 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. 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Delete Change — Addition COHEN, ROBERT NAME Hosohara, Tetsuo STREET ADDRESS 1285 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS 1285 Avenue of the Americas, 36th FL CITY-ST-ZIP NEW YORK NY 10019 CITY-ST-ZIP New York, NY 10019 TITLE Delete TITLE VP **C**hange Addition NAME IWANOTO, HIDEYUKI NAME Parris, Richard STREET ADDRESS 1285 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS 1285 Avenue of the Americas, 36th FL CITY-ST-ZIP NEW YORK NY 10019 CITY-ST-ZIP New York, NY 10019 Change TITLE ☐ Delete TITLE ☐ Addition NAME MARAIA, JOHN. NAME Hirata, Minoru STREET ADDRESS 1285 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS 1285 Avenue of the Americas, 36th FL CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10019 New York, NY 10019 TITLE TITLE Delete Change ☐ Addition HOSOHARA, TETSUO NAME NAME Wada, Akira, STREET ADDRESS 1285 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS 1285 Avenue of the Americas, 36th FL CITY-ST-ZIP NEW YORK NY 10019 CITY-ST-ZIP New York, NY 10019 Delete TITLE ☐ Change **Addition** COHEN, ROBERT NAME NAME Maraia, John 1285 AVENUE OF AMERICAS STREET ADDRESS STREET ADDRESS 1285 Avenue of the Americas, 36th FL NEW YORK NY 10019 CITY-ST-ZIP CITY-ST-ZIP New York, NY 10019 TITLE ☐ Delete Addition TITLE NAME NAME Hosohara, Tetsuo STREET ADDRESS STREET ADDRESS 1285 Avenue of the Americas; 36th FL C/TY-ST-ZIP CITY-ST-ZIP New York, NY 10019 12. 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 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE: _

FILED