

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002377

Entity Name: AVX USA CORPORATION**Current Principal Place of Business:**1 AVX BOULEVARD
FOUNTAIN INN, SC 29644**Current Mailing Address:**1 AVX BOULEVARD
FOUNTAIN INN, SC 29644 US**FEI Number:** 33-0379007**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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

Officer/Director Detail :

Title EVP, VP, CFO, TREASURER
Name CUMMINGS, KURT P
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP
Name LAWING, JOHN
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name DECENZO, DAVID
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name CHRISTIANSEN, DONALD B
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name KANO, KOICHI
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name STACH, JOSEPH
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR, CEO, PRESIDENT,
CHAIRMAN
Name SARVIS, JOHN
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name MAEDA, TATSUMI
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

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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: KURT P. CUMMINGS**TREASURER****04/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KUBA, TETSUO
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name YAMAGUCHI, GORO
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP
Name THOMAS, KEITH BRIAN
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP
Name VENUTO, PETER
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP
Name KING, WILLING
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP, SECRETARY
Name SLAVITT, EVAN
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title SR. VP
Name KELLY, KATHLEEN
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name INAMORI, KAZUO
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644

Title DIRECTOR
Name AOKI, SHOICHI
Address 1 AVX BOULEVARD
City-State-Zip: FOUNTAIN INN SC 29644