

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000006901

**Entity Name:** KAJIMA BUILDING & DESIGN GROUP, INC.**Current Principal Place of Business:**3414 PEACHTREE RD NE  
SUITE 1400  
ATLANTA, GA 30326**Current Mailing Address:**3414 PEACHTREE RD NE  
SUITE 1400  
ATLANTA, GA 30326 US**FEI Number:** 20-5654621**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 DIRECTOR  
Name OHASHI, NORIAKI  
Address 3550 LENNOX RD, NE  
SUITE 1850  
City-State-Zip: ATLANTA GA 30326

Title PRESIDENT, DIRECTOR  
Name STINER, JEFFREY H  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title CFO  
Name ALLEN, BONA  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title CONTROLLER  
Name ROBISON, JENNIE  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title VP  
Name MASHIKO, TAKUYA  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title VP  
Name GOODWIN, JAMES  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title VP  
Name SATO, YOSHINARI  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title DIRECTOR  
Name PIERCE, MIKE  
Address 6095 PARKLAND BLVD  
City-State-Zip: CLEVELAND OH 44124

**Continues on page 2**

*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:** ADAM WILSON**SECRETARY****02/20/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HALL, RANDY  
Address 2859 PACES FERRY RD SE  
SUITE 200  
City-State-Zip: ATLANTA GA 30339

Title VP, SECRETARY  
Name WILSON, ADAM  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title DIRECTOR  
Name UMEHARA, MOTOHIRO  
Address 3550 LENNOX RD NE  
SUITE 1850  
City-State-Zip: ATLANTA GA 30326

Title VP  
Name NEUMANN, ANDREW  
Address 3414 PEACHTREE RD NE  
SUITE 1400  
City-State-Zip: ATLANTA GA 30326

Title DIRECTOR  
Name KAWAMOTO, TARO  
Address 3550 LENOX ROAD NE  
SUITE 1850  
City-State-Zip: ATLANTA GA 30326