2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2017
Secretary of State
CC1257948636

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Entity Name: ENPROTECH CORP

Current Principal Place of Business:

4259 E 49TH STREET
CLEVELAND, OH 44125

Current Mailing Address:

4259 E 49TH STREET
CLEVELAND, OH 44125

FEI Number: 13-3206826

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CFOC
Name	ALBERT, DONALD
Address	4259 E 49TH STREET
City-State-Zip:	CLEVELAND OH 44125

Title	DIRECTOR
Name	MINEMURA, YUTAKA
Address	1251 AVENUE OF THE AMERICAS 51ST FLOOR
City-State-Zip:	NEW YORK NY 10020

Title	DIRECTOR, PRESIDENT
Name	PASCARELLA, CHRISTOPHER
Address	4259 EAST 49TH STREET
City-State-Zip:	CLEVELAND OH 44125

Title	DIRECTOR
Name	MORGAN, SANDRA
Address	1251 AVENUE OF THE AMERICAS 51ST FLOOR
City-State-Zip:	NEW YORK NY 10020

Title	CHAIRMAN
Name	YOSHIKAWA, NAOHIKO
Address	1251 AVENUE OF THE AMERICAS 51 FLOOR
City-State-Zip:	NEW YORK NY 10020

Title	DIRECTOR
Name	GARCIA, PEDRO
Address	4259 E 49TH STREET
City-State-Zip:	CLEVELAND OH 44125

Title	DIRECTOR
Name	SHINGU, TATSUSHI
Address	1251 AVENUE OF AMERICAS 51ST FLOOR
City-State-Zip:	NEW YORK NY 10020

Title	DIRECTOR
Name	WATANABE, SATOSHI
Address	1251 AVENUE OF THE AMERICAS 51ST FLOOR
City-State-Zip:	NEW YORK NY 10020

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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: DONALD ALBERT CFO 04/18/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FISHMAN, ROBERT
Address	1180 NW MAPLE STREET SUITE 200
City-State-Zip:	ISSAQUAH WA 98027