

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002189

Entity Name: MITSUBISHI TANABE PHARMA AMERICA, INC.**Current Principal Place of Business:**525 WASHINGTON BLVD.
SUITE 400
JERSEY CITY, NJ 07310**Current Mailing Address:**525 WASHINGTON BLVD.
SUITE 400
JERSEY CITY, NJ 07310 US**FEI Number:** 35-2552181**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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	PRESIDENT/CEO
Name	FUJIMOTO, ATSUSHI
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

Title	TREASURER
Name	SHIOYA, KAZUYUKI
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

Title	SECRETARY
Name	OLIVA, NICHOLAS
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

Title	DIRECTOR
Name	FUJIMOTO, ATSUSHI
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

Title	DIRECTOR
Name	TABARU, EIZO
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

Title	DIRECTOR
Name	TANAKA, EIJI
Address	525 WASHINGTON BLVD. SUITE 400
City-State-Zip:	JERSEY CITY NJ 07310

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: NICHOLAS OLIVA**SECRETARY****03/25/2019**

Electronic Signature of Signing Officer/Director Detail

Date