

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000000298

Entity Name: KOWA AMERICAN CORPORATION**Current Principal Place of Business:**55 E 59 ST 19A
NEW YORK, NY 10022**Current Mailing Address:**55 E 59 ST 19A
NEW YORK, NY 10022**FEI Number:** 13-5641923**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED CORPORATE SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE , FL 32312 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, DIRECTOR
Name HATA, SATOSHI
Address 55 E 59 ST 19A
City-State-Zip: NEW YORK NY 10022

Title TREASURER
Name NODA, YOSHIYUKI
Address 55 E 59 ST 19A
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name KONDO, TOMOHARU
Address 4-14 NIHONBASHI 3-CHOME,
City-State-Zip: CHUO-KU

Title DIRECTOR
Name SAKO, MASAYOSHI
Address 4-14 NIHONBASHI 3-CHOME
City-State-Zip: CHUO-KU

Title DIRECTOR
Name KAWAMATA, MASAYOSHI
Address 4-14 NIHONBASHI 3-CHOME
City-State-Zip: CHUO-KU TOKYO

Title DIRECTOR
Name IWASA, OHIDE
Address 4-14 NIHONBASHI 3-CHOME
City-State-Zip: CHUO-KU TOKYO

Title DIRECTOR
Name MISHINA, YASUHARU
Address 4-14 NIHONBASHI 3-CHOME,
City-State-Zip: CHUO-KU

Title DIRECTOR
Name FUKUSHIMA, MASAYUKI
Address 4-14 NIHONBASHI 3-CHOME
City-State-Zip: CHUO-KU

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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: YOSHIYUKI NODA**TREASURER****01/08/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FURUMOTO, KENJI
Address	4-14 NIHONBASHI 3-CHOME
City-State-Zip:	CHUO-KU