

2001 UNIFORM BUSINESS REPORT (UBR)

0128113

DOCUMENT # **F0000002214**
 1. Entity Name
DAIKIN U.S. CORPORATION

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 OCT 22 PM 4:32

Principal Place of Business Mailing Address
375 PARK AVENUE 375 PARK AVENUE
NEW YORK NY 10152 NEW YORK NY 10152



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
~~2450 N. KENTILL DR.~~
 Suite, Apt. #, etc. ~~302~~
 City & State ~~MIAMI FL~~
 Country ~~USA~~
 Zip ~~33176~~

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number **13-3491447** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
300004668943-3
-11/06/01-01052-013
 City **FL** Zip **33004** Phone **550.00 ***550.00**

8. 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$550.00**
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE P	<input checked="" type="checkbox"/> Delete
NAME MINEVO, YOSHIRO	
STREET ADDRESS 375 PARK AVENUE, SUITE 3308	
CITY-ST-ZIP NEW YORK NY 10152	
TITLE S	<input type="checkbox"/> Delete
NAME YAGI, TOSHIHARU	
STREET ADDRESS 375 PARK AVENUE, SUITE 3308	
CITY-ST-ZIP NEW YORK NY 10152	
TITLE T	<input checked="" type="checkbox"/> Delete
NAME HISATAKE, TAKA	
STREET ADDRESS 375 PARK AVENUE, SUITE 3308	
CITY-ST-ZIP NEW YORK NY 10152	
TITLE D	<input checked="" type="checkbox"/> Delete
NAME KAWAMURA, GUNTARO	
STREET ADDRESS UMEDA CNTR. BLDG., 2-4-12, NAKAZAKI-NISHI	
CITY-ST-ZIP KITAKU, OSAKA, JAPAN NY 10152	
TITLE D	<input checked="" type="checkbox"/> Delete
NAME SUEYOSHI, TATSUO	
STREET ADDRESS UMEDA CNTR. BLDG., 2-4-12, NAKAZAKI-NISHI	
CITY-ST-ZIP KITAKU, OSAKA, JAPAN NY 10152	
TITLE Treasurer	<input type="checkbox"/> Delete
NAME Yoshiyuki Demura	
STREET ADDRESS 375 Park Avenue, suite 3308	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Kenichi Koyama	
STREET ADDRESS 375 Park Avenue, suite 3308	
CITY-ST-ZIP New York, NY 10152	
TITLE Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Yoshiyuki Demura	
STREET ADDRESS 375 Park Avenue, suite 3308	
CITY-ST-ZIP New York, NY 10152	
TITLE Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Kiyohiko Ihata	
STREET ADDRESS UmEDA CNTR. BLDG., 2-4-12 Nakazaki-Nishi	
CITY-ST-ZIP Kitaku, Osaka, JAPAN	
TITLE Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Yoshinobu Inoue	
STREET ADDRESS UMEDA CNTR. BLDG. 2-4-12 Nakazaki-Nishi	
CITY-ST-ZIP Kitaku, Osaka, JAPAN	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information provided in this report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **X** *[Signature]* **08/22/01 20-935-4890**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date-time Phone #

OR2004 (5/01)