


2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVAL AND FEE
7/25/2006-90024-041 \$150.00-\$150.00

06 DEC 26 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000004319					
1. Entity Name DNP IMS AMERICA CORPORATION					
Principal Place of Business 4524 ENTERPRISE DRIVE NW CONCORD, NC 28027			Mailing Address 4524 ENTERPRISE DRIVE NW CONCORD, NC 28027		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 62-1575799	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable		8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>Rachel T. Hayes</i>		RACHEL T. HAYES		12/21/06	
		ASSISTANT SECRETARY		DATE	
FILE NOW!! FEE IS \$550.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOIKE, MASATO		NAME	HAYAKAWA, KEIGO	
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS	4524 ENTERPRISE DRIVE NW	
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP	CONCORD NC 28027	
TITLE	ST	<input checked="" type="checkbox"/> Delete	TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAKAGODRI, JUN		NAME	NAKASAKI, JUN	
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS	4524 ENTERPRISE DRIVE NW	
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP	CONCORD NC 28027	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOIKE, MASATO		NAME	YUJRO, KURODA	
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS	4524 ENTERPRISE DRIVE NW	
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP	CONCORD NC 28027	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUZUKI, TAKAO		NAME		200081734922
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS		11/13/06--01020--010 ***400.00
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OTAKE, FUMIO		NAME		200081734922
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS		01/03/07--01007--023 ***200.00
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP		
TITLE	CD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KASHIWABARA, SNIGERU		NAME		REINSTATEMENT 06 JSC
STREET ADDRESS	4524 ENTERPRISE DRIVE NW		STREET ADDRESS		
CITY-ST-ZIP	CONCORD, NC 28027		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Jun Nakasaki</i>		JUN NAKASAKI		7/19/06 (704) 784-7124	
				Date Daytime Phone #	