


1053

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03-DEC-29 PM 4:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F98000004319

1. Corporation Name  
**DAI NIPPON IMS (AMERICA) CORP.**

2. Principal Office Address <b>4524 Enterprise Drive NW</b>		3. Mailing Office Address <b>SAME AS 2.</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Concord, NC</b>		City & State	
Zip <b>28027</b>	Country	Zip	Country

**REINSTATEMENT**

4. Date Incorporated or Qualified To Do Business in Florida **qualified 7/29/98**

5. FEI Number <b>62-1575799</b>	Applied For <input type="checkbox"/> YES <input checked="" type="checkbox"/> NOT APPLICABLE
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6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name  
**GT Corporation System**

Street Address (P.O. Box Number is Not Acceptable)  
**1200 South Pine Island Rd.**

Suite, Apt. #, Etc.

City  
**Plantation**

State  
**FL**

Zip Code  
**33324**

8. I, being appointed the registered agent of the above named corporation, acknowledge and accept the obligations of section 807.0505 or 817.0503, F.S.

Signature of Registered Agent  
**Connie Bryan** **CONNIE BRYAN**  
**SPECIAL ASSISTANT SECRETARY**

REGISTERED AGENT MUST SIGN **12/30/2003**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	<b>SEE ATTACHED SHEET</b>		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 807.0401 or 817.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **Hideami Zaizen**  
**Hideami Zaizen, Secretary/Treasurer** **12/23/03** **704-784-7125**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **12/23/03** **704-784-7125**

BS

ATTACHMENT TO FLORIDA CORPORATION REINSTATEMENT APPLICATION OF  
DAI NIPPON INS (AMERICA) CORP. (DOCUMENT #F98000004319)

9. Name and street address of each officer and director:

<u>Titles</u>	<u>Names</u>	<u>Street Addresses</u>
✓ Chair/D	Kuniaki Kamei	4524 Enterprise Dr. NW, Concord, NC 28027
✓ P/D	Takao Suzuki	4524 Enterprise Dr. NW, Concord, NC 28027
✓ S/T	Hideomi Zaizen	4524 Enterprise Dr. NW, Concord, NC 28027
✓ D	Masato Koike	4524 Enterprise Dr. NW, Concord, NC 28027
✓ D	Fumio Otake	4524 Enterprise Dr. NW, Concord, NC 28027
D	Yujiro Kuroda	4524 Enterprise Dr. NW, Concord, NC 28027
✓ D	Kazuhiro Kawabata	4524 Enterprise Dr. NW, Concord, NC 28027
D	Shigeru Kashiwabara	4524 Enterprise Dr. NW, Concord, NC 28027

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Florida Department of State  
Division of Corporations  
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file date of 12/29/03  
Thanks - Brigham*

**CORPORATION REINSTATEMENT**

**DAI NIPPON IMS (AMERICA) CORP.**

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