2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23309

FILED Apr 17, 2009 Secretary of State

Entity Name: KONICA MINOLTA BUSINESS SOLUTIONS U.S.A., INC.

Current Principal Place of Business: New Principal Place of Business: 100 WILLIAMS DR RAMSEY, NJ 07446 **Current Mailing Address: New Mailing Address:** 100 WILLIAMS DR 500 DAY HILL ROAD RAMSEY, NJ 07446 TAX DEPT WINDSOR, CT 06095 FEI Number: 13-1921089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: CFO (X) Change () Addition HARAGUCHI, JUN HARAGUCHI, JUN Name: Name: 100 WILLIAMS DR 100 WILLIAMS DR Address: Address: City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: RAMSEY, NJ 07446 Title: VΡ Title: () Delete (X) Change () Addition NAKAGAWA, IKUO Name: NAKAGAWA, IKUO Name: 100 WILLIAMS DR 100 WILLIAMS DR Address: Address: RAMSEY, NJ 07446 RAMSEY, NJ 07446 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition LEONCZYK, MICHAEL Name: Name: 100 WILLIAMS DR Address: Address: City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition FERNANDEZ, JEFFREY NIELSEN, ALAN Name: Name: Address: 100 WILLIAMS DR Address: 100 WILLIAMS DR City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: RAMSEY, NJ 07446 Title: Title: () Delete (X) Change () Addition UMHOEFER, SHARON Name: CUPKA, BRIAN Name: 100 WILLIAMS DR Address: 100 WILLIAMS DR Address: City-St-Zip: RAMSEY, NJ 07446 City-St-Zip: RAMSEY, NJ 07446 Title: () Delete Title: () Change (X) Addition TAYLOR, RICHARD Name: Name: 100 WILLIAMS DR Address: Address: City-St-Zip: City-St-Zip: RAMSEY, NJ 07446

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL LEONCZYK VP 04/17/2009