

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36615

Entity Name: KAJIMA ASSOCIATES, INC.**Current Principal Place of Business:**3490 PIEDMONT RD NE
SUITE 900
ATLANTA, GA 30305**Current Mailing Address:**3490 PIEDMONT RD NE
SUITE 900
ATLANTA, GA 30305 US**FEI Number:** 22-3130508**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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

Officer/Director Detail :

Title SECRETARY
Name WILSON, ADAM
Address 3490 PIEDMONT RD. STE. 900
City-State-Zip: ATLANTA GA 30305

Title CONTROLLER
Name ROBISON, JENNIE
Address 3490 PIEDMONT RD. STE 900
City-State-Zip: ATLANTA GA 30305

Title TREASURER, ASST. SECRETARY
Name ALLEN, BONA
Address 3490 PIEDMONT ROAD, NE
SUITE 900
City-State-Zip: ATLANTA GA 30305

Title PRESIDENT, DIRECTOR
Name FUKUBA, KAZUMASA
Address 3490 PIEDMONT RD NE
SUITE 900
City-State-Zip: ATLANTA GA 30305

Title VP, DIRECTOR
Name KOSHIYAMA, YOSHIYUKI
Address 3490 PIEDMONT RD NE
SUITE 900
City-State-Zip: ATLANTA GA 30305

Title DIRECTOR, VP
Name MISHIMA, TAKASHI
Address 3490 PIEDMONT RD NE
SUITE 900
City-State-Zip: ATLANTA GA 30305

Title DIRECTOR
Name STINER, JEFF
Address 3490 PIEDMONT RD, NE
900
City-State-Zip: ATLANTA GA 30305

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: ADAM WILSON**SECRETARY****05/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date