

No. C 56224		Due no later than Aug 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. TECHNICAL AID CORPORATION AL LABBE TAX DEPARTMENT PO BOX 9130 220 NORWOOD PARK SOUTH NORWOOD MA 02062-9130 USA		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	REIKI MURATAKE	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
DIRECTOR	MARK LYMBERY	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
DIRECTOR	HITOSHI MOTOHARA	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
TREASURER	MARK LYMBERY	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
SECRETARY	JONATHAN T MANN	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
PRESIDENT	RALPH PETERSON	220 NORWOOD PARK SOUTH	NORWOOD	MA	USA	02062
5. Organized Under the Laws of: MA C 56224		6. Annual Report must be signed.* Signature: Jonathan T. Mann Name (type or print): Jonathan T. Mann		Date: 07/16/2012 Title: Secretary		
Processed 07/16/2012		* Electronically provided signatures are accepted as original signatures.				