

1.) CORPORATION NAME:

**NEC Corporation of America**

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1581463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000
PREFER	50

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NV**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6535 NORTH STATE HIGHWAY 161

CITY/ST/ZIP: IRVING, TX 75039

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SHINSUKE TAKAHASHI	
TITLE:	PRES/CEO/DIR	
ADDRESS:	6535 NORTH STATE HWY 161	
CITY/ST/ZIP/CO:	IRVING, TX 75039	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KENICHI KANAZU	
TITLE:	SR VP/CFO/T	
ADDRESS:	6535 NORTH STATE HIGHWAY 161	
CITY/ST/ZIP/CO:	IRVINE, TX 75039	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MASAAKI NAKAJIMA	
TITLE:	EXECUTIVE VP	
ADDRESS:	6535 NORTH SATE HIGHWAYT 161	
CITY/ST/ZIP/CO:	IRVING, TX 75039	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JEREMY S STRAUSS	
TITLE:	SECRETARY	
ADDRESS:	6535 NORTH STATE HWY 161	
CITY/ST/ZIP/CO:	IRVING, TX 75039	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ISAMU KAWASHIMA	
TITLE:	DIRECTOR	
ADDRESS:	7-1 SHIBA 5-CHOME, MINATO-KU	
CITY/ST/ZIP/CO:	, , FN	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	TAKAYUKI MORITA	
TITLE:	DIRECTOR	
ADDRESS:	7-1 SHIBA 5-CHOME, MINATO-KU	
CITY/ST/ZIP/CO:	, , FN	

NAME:	SHINICHI SHOJI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7-1 SHIBA 5-CHOME, MINATO-KU		
CITY/ST/ZIP/CO:	JAPAN , , FN		

NAME:	NOBUYUKI YANAGINUMA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7-1 SHIBA 5-CHOME, MINATO-KU TOKYO 108-8001		
CITY/ST/ZIP/CO:	JAPAN , , FN		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JEREMY S STRAUSS	JEREMY S STRAUSS,	3/13/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.