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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: January 1 - March 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation
000853825	IPC (USA), INC.

3. Principal office address	City	State	Zip
4 HUTTON CENTRE DRIVE, SUITE 700	SANTA ANA	CA	92707

4. Business Phone No.	5. State of Incorporation
949-648-5600	CALIFORNIA

6. Brief description of the character of business conducted in Rhode Island
TRADING, WHOLESALE, & COMMERCIAL ACCOUNT SALES OF PETROLEUM PRODUCTS

RECEIVED 2016 JUN 15 P 2:35 SECRETARY OF STATE CORPORATIONS DIV

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Vice-President Name
HIROKI OKINAGA	RANDY JONES
Street Address: 4 HUTTON CENTRE DRIVE, SUITE 700	Street Address: 4 HUTTON CENTRE DRIVE, SUITE 700
City: SANTA ANA, State: CA, Zip: 92707	City: SANTA ANA, State: CA, Zip: 92707
Secretary Name	**Treasurer Name**
JAMES M. TAKEUCHI	JAMES M. TAKEUCHI
Street Address: 4 HUTTON CENTRE DRIVE, SUITE 700	Street Address: 4 HUTTON CENTRE DRIVE, SUITE 700
City: SANTA ANA, State: CA, Zip: 92707	City: SANTA ANA, State: CA, Zip: 92707

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

Director Name	Director Name
HIROKI OKINAGA	TSUYOSHI MATSUMOTO
Street Address: 4 HUTTON CENTRE DRIVE, SUITE 700	Street Address: 5-1, Kita-Aoyama 2-chome Minato-Ku, Tokyo 107-8077
City: SANTA ANA, State: CA, Zip: 92707	City: , State: , Zip:
Director Name	**Director Name**
ATSUSHI ONISHI	
Street Address: 5-1, Kita-Aoyama 2-chome Minato-Ku, Tokyo 107-8077	Street Address:
City: , State: , Zip:	City: , State: , Zip:

9. SHARES AUTHORIZED

This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.
See Section 9 of instruction sheet.

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
200	COMMON	0

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FILED
JUN 15 2016

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

06/14/2016
Signature of Authorized Representative — Date

JAMES M. TAKEUCHI
Print or Type Name of Authorized Representative

Form No. 630
Revised: 01/2012