

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

2005

PROFIT CORPO Filing Period: January 1 - FORM MUST BE TYPED OR PR	March I • I	NNUAL REPUR Filling Fee: \$50.00	CT FOR THE YEA	R 200	<u>J</u>
t. Corporate ID No.	2. Name of Corpo	ration			.
110405	1	merica Warranty Corp.		·	
3. Street Address Principal Busine			City	State	Zip
440 N. Fairu	vau Drive		Vernon Hills	IL	60061
4. Business Phone No.	J	5. State of Incorporation	7		6. SIC Code
847-970-4101		DELAWARE		··	5744
7. Brief Description of the Chamel PURCHASE AND SA	er of Business Conducte LE OF EXTENDED	ed in Rhode Island WARRANTY FOR CONSTI	RUCTION EQUIPMENT.		
				SPACES BEFORE USING	ATTACHMENTS
B. NAMES AND ADDRESS President Name	ES OF THE OFFIC	ERS: (A BOA FOR AT	Vice President Name	JANCES BEFORE COM	Allemanis
	ak:			Boatman	
<u>DSamu Yamaz</u> Sireer Address	urvi		: Street Address	DIMACITIM II	· · · ·
	y Drive		440 N. Fair	way Drive	
City.	State	Zip	City	State	Zψ
Vernon Hills	IL	60061	Vernon Hills	I.	60061
Secretary Name			Treasurer Name		
David D. No.	ido		<u>Gary Kashee</u>	2	
Sirvet Address			Street Addicks		
440 N. Fairwa		1	440 N Fairwa	, , , , , , , , , , , , , , , , , , ,	274
Cuy	State	Zip	City	State	Zip
Vernon Hills	I IL	60061	: Vernon Hills	ー ユム N SPACES BEFORE USI	60061
9. NAMES AND ADDRESS Director Name	ES OF THE DIKE	CTORS: ("X" BOX FOR A	Director Name	1 SPACES BEFORE USI	NO ALTACHMENTS
	azaki		Garv Kasbee	4	
Sirvei Address	uzuni		Sinvi Address	<u>. </u>	
440 N. Fairwa	w Drive	•	440 N. Fairu	lay Drive	
City	State	Zip	City	State	Zip
Vernon Hills	IL	60061	Vernon Hills	IL	60061
Director Name			Director Name YIONE		
None			PIONCE.		
Street Address			Street Address		
City	State	Zíp	City	State	Zip
•		'			
10. SHARES AUTHORIZE	D ("X" BOX FOR	ATTACHMENT)	11. SHARES ISSUED ("X" BOX FOR ATTACE	IMENT) 📋
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Cluss/Series	Par Value	Number of Shares	Class/Scries	Par Value
3,000 COMM NO PAR V	AI IIE		1000		No parvalu
5,000 COMM NO PAR 1/			1,000	Common	MO how a more
		<u></u>			
This report must b	oc signed in ink by	y either the President, Vic	e President, Secretary, Assista	int Secretary, Treasurer,	Receiver or Trustee
	# #				
III	AIDI KOBI HAH DUKI 1				hat I have examined this re
.	*11	10405*		npanying schedules and sta	itements, and that all stater
1-21-	7)		contained herein are	true and forrect.	. 20
File Date			_pri	sin -	1-28-2003
7/76	112		Signature of Officer		Date
Check No.	1-6		David D	. Naido	
J. C.			Print or Type Name of		
""·———			Secretar	\	
FOR SECRETARY OF	STATE USE ONLY		Title of Officer	}	
			rine of Officer		



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

Corporate ID No	2. Name of Corporatio						
66419 Street Address Principal Business O	KOMATSU AM	ERICA CORP.	City	State	Ζφ		
440 N. Fairway	~		Vernon Hills	IL	60061		
Business Phone No.		5. State of Incorporation			6. SIC Code		
847-970-41		GEORGIA			8888		
Brief Description of the Character of TO PURCHASE, DESIG			UCTION EQUIPMENT, MACHIN	IE TOOL ETC.			
. NAMES AND ADDRESSES	OF THE OFFICERS	S: ("X" BOX FOR AT	TACHMENT) DILL IN S	PACES BEFORE USING	ATTACHMENTS		
resident Name CEO			Vice President Name				
David Grzelak			Gary Aubry				
nri Address 440 N. Fairway	torive.		Sircet Address 440 N. Fairwa	w Drive			
ity	State	Zip	City	State	Zip		
Vernon Hills	IL	60061	Vernon Hills Treasurer Name	IL	60061		
David D. Nan	do		Yoshi Yanai				
17001 Address 440 N. Fairwa	1 Drive		Street Address 440 N. Fairu	vay Drive			
ity	State	Z(p	City	State	Zip		
Vernon Hills	IL	60061	- Vernon Hills	IL.	60061		
. NAMES AND ADDRESSES Director Name	OF THE DIRECTO	RS: ("X" BOX FOR A	: Director Name	SPACES BEFORE USIN	G VI IVCHWEM 12		
Kazuhiro Aovaa	i		Kunihiko Kon	nivama			
rreet Address			Street Address				
2-3-6 A Kasaka			2-3-6 AkasaK	<u>a , Minato-Ku</u> Isaac	Zip		
Tokyo 107	Japan Japan	ZΨ	City Tokyo 107 Director Name	Japan			
David Grzelak	•		Ken Nakamur	a			
rreet Address		<u>.</u>	Street Address				
440 N. Fairwa	y brive		440 N. Fairway Drive				
Vernon Hills o. shares authorized	State IL ("X" BOX FOR AT	Zip 600 6 1 TACHMENT) □	Uernon Hill	S IL S FOR ATTACHI	1006 <u> </u> 6006 <u> </u> MENT)		
UTHORIZED SHARES	•	-:	ISSUED SHARES		<i>.</i>		
iumber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value		
8,000,000 \$100.00 PAR VAL	.UE	<u> </u>	7,677.925	Common	\$100.00 Par Va		

File Date 7.17.09

Check No. 470 48

FOR SECRETARY OF STATE USE ONLY

Inder penalty of perjury, I declare and affirm to neluding any accompanying schedules and sta	
ontained perein are true and correct.	2/12/04
ignalure of Officer	5D Date
David D. Nardo	
Print or Type Name of Officer	
Secretary	····
Title of Officer	Form 630 Rev. 12/03



City

AUTHORIZED SHARES

3,000 COMM NO PAR VALUE

Number of Shares

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

State

Class/Series

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

Zip

Par Value

Matthew A. Bi	rown, Secretary of S	iale			401.222.3040
			FOR THE YEAR	2004	
illing Period: January I - Ma FORM MUST BE TYPED OR PRINT	•	Fec: \$50.00			
Corporate ID No	2. Name of Corporation	-	- <u></u>		
110405	Komatsu Americ	a Warranty Corp.			
Street Address Principal Business O	fice	· • • • • • • • • • • • • • • • • • • •	Cipy	State	Zφ
440 North Fai	rway Drive		Vernon Hills	IL	60061
. Business Phone No	0	5. State of Incorporation			6. SIC Code
847-970-410		DELAWARE			5744
Brief Description of the Character of PURCHASE AND SALE	OF EXTENDED WAR	RANTY FOR CONSTRUC			
NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) FILL IN SPA	CES BEFORE USING A	TTACHMENTS
resident Name		•	Vice President Name		
<u>Osamu Yama</u>	zaki		Robert M. Boatr	nan.	
treet Address	. =4		Street Address		
	y Drive	1:		ay Drive.	7/6
Vernon Hills	IL	^{Zip} 60061	Vernon Hills	Siate IL	60061
Secretary Name			Treasurer Name		
David D. Nard	0		Gary Kasbeer		
Treet Address	ou Drive			au Drive	
440 N. Fairu	State	2/2	440 N. Fairw	State	7/0
Vernon Hills	JL	ZIP 6006 S: [("X" BOX FOR ATI	Vernon Hills	IL PACES BEFORE USING	6006 6006
O. NAMES AND ADDRESSES	OF THE DIRECTOR	S: (X BUX FUR ATT	Director Name	FACES BEFORE USING	ATTROMENTS
_ \ 1	azaki _		Garu Kasbeer		
Street Address	uzano		Street Address	· ·-	
440 N. Fairwo	y Drive		440 N. Fairwa	w Drive	
City	State	Zip	City	State	Zip
Vernon Hills	J IL	60061	Vernon Hills	IL	60061
Director Name			Director Name		
<u>None</u>			None		
Street Address			Street Address		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

ISSUED SHARES

Number of Shares

1.000

State

Class/Series

Common

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

Zφ

Par Value

No Par Vulue

	* 1 1 0 4 0 5 *	Under penalty of perjury, I declare and affirm ti including any accompanying schedules and sta	hat I have examined this report, tements, and that all statements
File Date	2/20/04	Signature of Officer	2-13-200 ¹
Check No	616146	David D. Nando Print or Type Name of Officer	
By:FOR S	ECRETARY OF STATE USE ONLY	Secretary Title of Officer	

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

2003

Filing Period: January 1-		ing Fee: \$50.00			INSTRUCTIONS
(FORM MUST BE TYPED OR PRINTED I. 1. Corporate ID No.	N BLACK) 2. Name of Corporation				
110405	• •	a Warranty Corp.			
3. Street Address Principal Business Offic	re .		City	State	Zip
440 N. Fairwa 4. Business Phone No.	y Drive		Vernon Hills	IL	6. SIC Code
	•	5. State of Incorporation			5744
847-970-4100 7. Brief Description of the Character of B	lusiness Conducted In Rho	DELAWARE de Island			0.44
Selling Extended 8. NAMES AND ADDRESSES President Name	d Warranty of the officer	Policies RS (*x* BOX FOR ATTACHI	MENT) FILL IN SPACES B Vice President Name	EFORE USING ATTACHM	ENTS
Hidetaka Kita			NON E. Street Address		
1164 Georgetou Vernon Hills	in Way	Zip	City	State	Zip
Variant Hills	TI	60061	C,		•
Secretary Name			Treasurer Name	•	•
David D. Nardo Street Address			MONE Street Address		
936 Quaker Hill:	S		•	6 0.40	716
Libertyville	State IL	60048	City	State	Zip
9. NAMES AND ADDRESSES		ORS ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Director Name	S BEFORE USING ATTACH	MENTS
Hidetaka kita succe Address 1164 Georgetov City Vernon Hills			None Street Address		
1164 Georgetou	on way		Citi	State	Zip
Van Uille	State T1.	^{zip} 6∞61	Clly	State	<i></i> p
Vernon null		ewel	Director Name		•
none.			none		
Street Address			Street Address		
City	State	Zip	- City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACH	MENT)	11. SHARES ISSUED (*)	X" BOX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	· Number of Shares	Class/Series	Par Value
3,000 COMM NO PAR VALUE	E		. 1,000	Commun	No Par Value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: . Check No.:

FOR SECRETARY OF STATE USE ONLY

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.

Will !	Vare 2-18-2003
Signature of Officer	Dote

David D. Nardo Print or Type Name of Officer



Form 630 12/02

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

	Office o	f the Secretary of State						100 1	orin
•	••		•						
PRC	FIT	CORPORATI	ON	ANNUAL	REPORT	FOR	THE	YEAR	



Filing Period: Janua	ry 1-March 1 •	Filing Fee: \$50.00			- PLEASE READ INSTRUCTIONS
(FORM MUST BE TYPED IN E	BLACK)				
1. Corporate ID No.	2. Name of Corpora			-	
110405 3. Street Address Principal Busin		nerica Warranty Corp.	Class	es.s.	•
	_ •		Vernon Hills	State IL	^{zı,} 60061
440 N. Fairu	ay siwe	5. State of Incorporation	vernore reco	10	6. SIC Code
(847) 970 - 4	100	DELAWARE			5744
7. Brief Description of the Chara		n Rhode Island			
Selling Exte	ended Warran	LTY POLICIES CERS ("X" BOX FOR ATTACK			
	ESSES OF THE OFFI	CERS ("X" BOX FOR ATTACH		EFORE USING ATTACH	IMENTS
President Name			· Vice President Name		
Steve Day			none Street Address		
22025 W.	Vernon Ridge	Drive	•		
City	State	Zio	City	State	Zip
Ivanhoe.	ŢĻ	60060			
Secretary Name	Manda		- Treasurer Name		
David D.	Narao		MONE Street Address		
	cer Hills		Trices Maniers		
City Liberty Vil	State	Zip	City	State	Zip
Liberty Vil	le IL	600 48	:		
9. NAMES AND ADDR	ESSES OF THE DIRE	ECTORS ("X" BOX FOR ATTA		S BEFORE USING ATTA	CHMENTS
Director Name			Director Name		
Steve Day		•	Street Address		
22025 W	Vernou Rid	ae Drive.	:		
City	Vernon Rid	Zip	City	State	Zip
Ivanhoe	IL	: 60060		•	
Director Name			Director Name		
None Street Address			NON C. Street Address		
			Sirett Andress		
Clly	State	Zip	City	State	Zip
		<u>.</u> .	•		
10. SHARES AUTHORIZ	ZED ("X" BOX FOR ATTA	ACHMENT)	11. SHARES ISSUED (2)	(* BOX FOR ATTACHMENT)	
AUTHORIZED SHARES	Class (Carles		ISSUEI) SHARES		
3,000 COMM NO PAR	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
3,000 COMM NO PAR	PALUE		1,000 shares	Common	No Par Value
-					
This report must be sig	gned in ink by eith	er the President, Vice P	President, Secretary, Assis	tant Secretary, Treasur	er, Receiver or Trustee
III		8	-	·	
		i i i i i i i i i i i i i i i i i i i			



	2.11.02				
Elle Date:					
Check No.:	849749				
Ву	Ĉc				
ECH SECRETARY OF STATE LISE ONLY					

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.

Signature of Officer

David D. Naido Print or Type Name of Officer

Title of Officer

⇔ 3

Form 630 12/01

KOMATSU AMERICA WARRANTY CORP. OFFICERS AND DIRECTORS

DIRECTORS:

Steve Day 22025 W. Vernon Ridge Drive Ivanhoe, IL 60060 DOB 05/25/55 SS# 217-70-9296

OFFICERS:

Steve Day 22025 W. Vernon Ridge Drive Ivanhoe, IL 60060 DOB 05/25/55 SS# 217-70-9296

David D. Nardo
936 Quaker Hill
Libertyville, IL 60048
DOB 10/11/42 SS# 277-38-6988

M. Gauss-Ehring 192 E. Ranney Avenue Vernon Hills, IL 60061 DOB 7/17/64 SS# 334-66-6004

B. Bock 3500 N. Nordica Chicago, IL 60634 DOB 6/22/69 SS# 356-68-7316

Komatsu America Warranty Corp.

Officers and Directors whose business address is:

440 N. Fairway Drive P.O. Box 8112 Vernon Hills, Illinois 60061-8112

> Steve Day David D. Nardo Michelle Gaus Ehning B. Bock

President, Director Secretary Assistant Secretary Manager, Cash Management & Banking Relations

Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT	CORPORATION	ANNUAL	REPORT	FOR	THE	YEAR	2001
illing Period	· Innuary 1-March 1 .	Filling Fee: \$50	1.00				



(FORM MUST BE TYPED IN BLAC	CK)					
1. Corporate ID No. 110405	2. Name of Corporation Komatsu Ame	rica Warranty (Corp.			<u> </u>
3. Street Address Principal Business (City		State	Zip
440 N. FAIR			VERNON	HILLS	IL	6. SIC Code
847-970-41			.0			5744
SELLING OF 8. NAMES AND ADDRESS President Name	EXTENDEL ES OF THE OFFICE	NARRANT RS (*x* box for attachi	Y POL AENT) XFILI IN Vice President Nam		DRE USING ATTACHM	ENTS
STEVE DAY			RAU	ANDER	'SON	
22025 W. V	ERNON RID	GE DR	640 .	MULL.	ADY PARK	WAY
IVANHOE Secretary Name	. <i>IL</i>	60060	LIBERT Treasurer Name	y.VILLE	16.	60048.
DAVID D. NA	RDO		Street Address			
936 QUAKE	R HILL	Zip	City		State	Zip
LIBERTY VILLE 9. NAMES AND ADDRESS	ES OF THE DIRECT	21p 60048 ORS (*X* BOX FOR ATTAG	· HMENT) FILL:	IN SPACES RE	FORE USING ATTACH	
Director Name			Director Name			
STEVE DAY			RAY A	NDERS	ON	
ZZOZS W. 1 IVAN HOE .	VERNON RIL	DEE DR	640 1	MULLA.	DY PARKU)AY
		60060	LIBERT Director Name	y VILLE	: IL .	. 60048
VERNE TUI	TE					
17020 11	DOUD DIDA	s no	Street Address			
17929 W., GURNEE	State NIUG	Zip CA.	City		State	Zip
GURNEE	/L	60031				·
10. SHARES AUTHORIZED AUTHORIZED SHARES			11. SHARES IS ISSUED SHARES	SSUED (*x* BC	OX FOR ATTACHMENT)	
Number of Shares	Class/Series	Par Value	Number of Shares		Class/Series	Par Value
3,000 COMM NO PA	R VALUE		1000		Common	NO PAR
						•

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee.

Title of Officer



	2/1	
File Date: _		
Check No.:	800558	
Ву:	2.	
	TABLE OF STATE USE ONLY	

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.

fluit	Man	1/29/2001
Signature of Officer		Date
_		

DAVID D. NARDO	
Print or Type Name of Officer	
Coase many	
SECRETARY	