


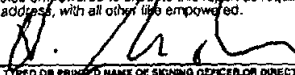
2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-05-2005 90220 010 ***150.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
50054891

DOCUMENT # F03000002271			
1. Entity Name SIXTY USA RETAIL, INC.			
Principal Place of Business 826 LINCOLN ROAD MIAMI BEACH, FL 33139		Mailing Address 2 WALL STREET C/O CARTER LEYARD MILBURN LLP NEW YORK, NY 10005	
2. Principal Place of Business		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required	
4. FEI Number 30-0129925		Applied For <input type="checkbox"/> Not Applicable	
5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE		DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agents signature required when remaining)	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ROSSI, RENATO	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	ST WILTZER, MARK	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	AS DAVIS, H. THOMAS JR	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	AT AMERI, MAX	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D TRISCHITTA, ROCCO	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D HASSAN, VITTORIO	TITLE	
NAME	435 HUDSON STREET	NAME	
STREET ADDRESS	NEW YORK, NY 10014	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other title empowered.			
SIGNATURE: 		30 JUNE 2005 212 238-5830	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
MARK WILTZER SECRETARIAL			

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