

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002359

Entity Name: MALCA-AMIT USA, LLC

FILED
Apr 13, 2005
Secretary of State

Current Principal Place of Business:

580 FIFTH AVENUE
NEW YORK, NY 10036

New Principal Place of Business:

Current Mailing Address:

580 FIFTH AVENUE
NEW YORK, NY 10036

New Mailing Address:

FEI Number: 13-3042269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BOULEVARD, SUITE 508
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: ALON, SHMUEL
Address: 580 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10036

Title: SVP (X) Delete
Name: PRZYWARA, ROBERT
Address: 580 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10036

Title: VP (X) Delete
Name: MALKA, SHLOMO
Address: 580 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10036

Title: VP (X) Delete
Name: LAHAV, RAMY
Address: 580 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10036

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALON, SHMUEL
Address: 580 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10036

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: APRILLE WIGGINS

ADM

04/13/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date