

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05909

Entity Name: SDV (USA) INC.

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

2070 NW 79 AVE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

150-10 132 STREET
JAMAICA, NY 11434 US

New Mailing Address:

FEI Number: 13-2635593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: REGINA CLERKIN, ASSISTANT SECRETARY

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATTHYS, CLAUDE
Address: 31-32, QUAI DE DION BOUTON
City-St-Zip: 98211 PUTEAUX CEDEX FRANCE,

Title: AS () Delete
Name: WE MEI, CHOU
Address: 150 10 132 AVE
City-St-Zip: JAMAICA, NY 11434

Title: TD () Delete
Name: GAILHARD, JEAN CLAUDE
Address: 150 10 132 AVE
City-St-Zip: JAMAICA, NY 11434

Title: P () Delete
Name: NAUDIN, PHILIPPE
Address: 150-10 132 STREET
City-St-Zip: JAMAICA, NY 11434 US

Title: V () Delete
Name: STEINBOCK, ERIC
Address: 436 ROZZI PLACE
City-St-Zip: SOUTH SAN FRANCISCO, CA 94080

Title: O () Delete
Name: MALET, PIERRE
Address: 150-10 132 AVENUE
City-St-Zip: JAMAICA, NY 11434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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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 Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIPPE NAUDIN

Electronic Signature of Signing Officer or Director

PRES

01/12/2006

Date