2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000714

Entity Name: NEW WAVE USA LLC

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O LIGNE ROSET MIAMI 2401 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

C/O LIGNE ROSET MIAMI 2401 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

FEI Number: 35-2158456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US

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:

City-St-Zip:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: JALON, BERTRAND
Address: 2401 PONCE DE LEON

City-St-Zip: CORAL GABLES, FL 33134

 Title:
 MGRM () Delete

 Name:
 CIERC-RENAUD, PAUL

 Address:
 2401 PONCE DE LEON

 City-St-Zip:
 CORAL GABLES, FL 33134

 Title:
 MGRM () Delete

 Name:
 ROSET, PIERRE

 Address:
 665 BROADWAY #800

NEW YORK, NY 10012

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition

Name: JALON, BERTRAND
Address: 2401 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change () Addition

Name: CIERC-RENAUD, PAUL
Address: 2401 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Change () Addition

 Name:
 ROSET, PIERRE

 Address:
 665 BROADWAY #800

 City-St-Zip:
 NEW YORK, NY 10012

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: BERTRAND JALON MGR 04/28/2005