


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000007666 1. Entity Name EQUISSAGE USA, LLC	
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Principal Place of Business 6230 NW 23 ST. BOCA RATON, FL 33434	Mailing Address 6230 NW 23 ST. BOCA RATON, FL 33434
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 75-3046034	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

GIBERT, EVA
6230 NW 23 ST.
BOCA RATON, FL 33434

**DO NOT WRITE
IN THIS SPACE**

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: Eva Gilbert PRESIDENT-MANAGER 01.28.2004
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GIBERT, EVA 6230 NW 23 ST. BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KLIMSCHA, ALBERT 6230 NW 23 ST. BOCA RATON, FL 33434
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02/02/04-80097-017 50.00

**DO NOT WRITE
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11. 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 is true and accurate and that my 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 688, Florida Statutes.

SIGNATURE: Eva Gilbert EVA GIBERT PRESIDENT 01.28.2004 561 470054
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #