2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089499

Entity Name: INSTEP USA, LLC

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2400 E LAS OLAS BLVD. PMB 259 FT. LAUDERDALE, FL 33301 US **New Mailing Address: Current Mailing Address:** 2400 E LAS OLAS BLVD. PMB 259 FT. LAUDERDALE, FL 33301 US FEI Number: 20-2013079 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: GRUSHOFF & POSADA, INC. GRUSHOFF & POSADA, INC. 6991 W BROWARD BLVD 6299 W SUNRISE BLVD. SUITE 211A SUITE 104 PLANTATION, FL 33317 US PLANTATION, FL 33313 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: RODRIGO POSADA 01/13/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition Title: () Delete CHRISTIANSEN, JON R Name: Name: 2400 E LAS OLAS BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition HASELHURST, RICHARD Name: Name: Address: 2400 E LAS OLAS BLVD. Address: City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition CHRISTIANSEN, PAMELA Name: Name: 2400 E LAS OLAS BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: () Delete Title: MGR Title: () Change () Addition Name: HASELHURST, SABINE Name: Address: 2400 E LAS OLAS BLVD Address: City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition WILLENS, STEPHEN M Name: Name: 2839 VIZZOLINI COURT Address: Address: City-St-Zip: City-St-Zip: PLEASANTON, CA 95466 US

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 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: JON CHRISTIANSEN MGR 01/13/2006