## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000117756

Entity Name: EXA USA, INC.

FILED Jan 19, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
217 WILTO WESTPOR	ON RD RT, CT 06880					
Current M	ailing Addres	s:	New Mailing Address:			
217 WILTO WESTPOR	ON RD RT, CT 06880					
FEI Number:	90-0004616	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	ew Registered Agent:	
	JOHN E K NDERSEN DR BEACH, FL 3:					
	named entity s e of Florida.	submits this statement for the p	urpose of changing i	ts registered of	fice or registered agent, or both,	
SIGNATUF	RE:					
	Electron	ic Signature of Registered Age	nt		Date	
Election Car	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () VOSS, THEODO 217 WILTON R WESTPORT, C	ס	Title: Name: Address: City-St-Zip:	P (X) VOSS, THEODO 217 WILTON RE WESTPORT, CT	)	
Title: Name: Address: City-St-Zip:	S () VOSS, JUDITH 217 WILTON R WESTPORT, C		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ROCHAT, PIER 19 ROUTE DES	Delete RE HEVIVES CH-1227 VEVA, SW SW	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () SOH, EDWARD 160 W 85TH ST NEW YORK, N	-	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	

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 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: THEODORE VOSS P 01/19/2005