

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007789

Entity Name: MOTOR-SAPIENS USA INC.

FILED
Jan 18, 2005
Secretary of State

Current Principal Place of Business:

471 SE 3RD TERRACE
POMPANO BEACH, FL 33060

New Principal Place of Business:

331 SE 15 AVE
POMPANO BEACH, FL 33060

Current Mailing Address:

471 SE 3RD TERRACE
POMPANO BEACH, FL 33060

New Mailing Address:

331 SE 15 AVE
POMPANO BEACH, FL 33060

FEI Number: 75-2995119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CSORDAS, ILDIKO
471 SE 3RD TERRACE
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

CSORDAS, ILDIKO
331 SE 15 AVE
POMPANO BEACH, FL 33060 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: CSORDAS ILDIKO

01/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOVAK, ATTILA
Address: 471 SE 3RD TERRACE
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP () Delete
Name: CSORDAS, ILDIKO
Address: 471 SE 3RD TERRACE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NOVAK, ATTILA
Address: 331 SE 15 AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP (X) Change () Addition
Name: CSORDAS, ILDIKO
Address: 331 SE 15 AVE
City-St-Zip: POMPANO BEACH, FL 33060

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: ATTILA NOVAK

P

01/18/2005

Electronic Signature of Signing Officer or Director

Date