

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05909

Entity Name: SDV (USA) INC.

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

2101 NW 82 AVENUE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

150-10 132 AVENUE
JAMAICA, NY 11434 US

New Mailing Address:

FEI Number: 13-2635593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATTHYS, CLAUDE
Address: 31-32, QUAI DE DION BOUTON
City-St-Zip: 98211 PUTEAUX CEDEX FRANCE,

Title: AS () Delete
Name: WEI MEI, CHOU
Address: 150 10 132 AVE
City-St-Zip: JAMAICA, NY 11434

Title: TD () Delete
Name: GAILHARD, JEAN CLAUDE
Address: 901 W. HILLCREST BLVD.
City-St-Zip: INGLEWOOD, CA 90301

Title: P () Delete
Name: NAUDIN, PHILIPPE A
Address: 150-10 132 STREET
City-St-Zip: JAMAICA, NY 11434 US

Title: V () Delete
Name: STEINBOCK, ERIC
Address: 377 SWIFT AVENUE
City-St-Zip: SO. SAN FRANCISCO, CA 94080

Title: V () Delete
Name: MALET, PIERRE
Address: 150-10 132 AVENUE
City-St-Zip: JAMAICA, NY 11434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PHILIPPE A NAUDIN

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01/06/2009

Electronic Signature of Signing Officer or Director

Date