

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109603

Entity Name: WAVEUSA.COM, INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

4521 PGA BLVD STE 278
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

4521 PGA BLVD STE 278
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 04-3306452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KONDO, IHOKO
8429 ALISTER BLVD WEST
PALM BEACH GARDENS, FL 33418 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: C () Delete
Name: SATO, MIYO
Address: 3-19-9 NAKAOCHIAI, SHINJUKU-KU
City-St-Zip: TOKYO 161-0032 JAPAN,

Title: D () Delete
Name: NISHIMURA, KAZUNOBU
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D () Delete
Name: KONDO, IHOKO
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NISHIMURA, KAZUNOBU
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP (X) Change () Addition
Name: KONDO, IHOKO
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DIR (X) Change () Addition
Name: KONDO, IHOKO
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: TR () Change (X) Addition
Name: NISHIMURA, KAZUNOBU
Address: 8429 ALISTER BLVD WEST
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: IHOKO KONDO

DR

01/27/2009

Electronic Signature of Signing Officer or Director

Date