


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 19, 2007 8:00 am**  
**Secretary of State**

06-19-2007 90001 038 \*\*\*550.00

**DOCUMENT # 837007**

1. Entity Name  
**RICHEMONT NORTH AMERICA, INC.**



Principal Place of Business      Mailing Address

**THREE ENTERPRISE DR.**      **PO BOX 186**  
**SHELTON, CT 06484 US**      **SHELTON, CT 06484**

40121113



2. Principal Place of Business - No P.O. Box #      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

06062007      Chg-P      CR2E034 (12/06)

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number      Applied For

**13-2852910**      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City      **FL**      Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable      (NOT Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	SAAGE, GARY A JR.	
STREET ADDRESS	50 JERMYN STREET	
CITY - ST - ZIP	ST JAMES LONDON, UK sw1y 6lx	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	O'SHAUGHNESSY, HELEN	
STREET ADDRESS	8294 61ST RD	
CITY - ST - ZIP	MIDDLE VILLAGE, NY 11379	
TITLE	CEO	<input checked="" type="checkbox"/> Delete
NAME	BARTON, CALLUM	
STREET ADDRESS	955 FIFTH AVE	
CITY - ST - ZIP	NEW YORK, NY 10022	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BARTON, CALLUM	
STREET ADDRESS	955 FIFTH AVE.	
CITY - ST - ZIP	NEW YORK, NY 10022	
TITLE	COO	<input checked="" type="checkbox"/> Delete
NAME	MAWICKE, DANIEL C	
STREET ADDRESS	41 BRITTANY AVENUE	
CITY - ST - ZIP	TRUMBULL, CT 06611	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	President & CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Daniel C. Mawicke	
STREET ADDRESS	4 Echo Woods Circle, Northbrook Condo	
CITY - ST - ZIP	Monroe, CT 06468	
TITLE	CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kevin Byrne	
STREET ADDRESS	16 Taunton Lane	
CITY - ST - ZIP	Newtown, CT 06470	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Helen O'Shaughnessy	
STREET ADDRESS	8294 61ST RD	
CITY - ST - ZIP	Middle Village, NY 11379	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin W. Byrne      Kevin W. Byrne      6/12/07      203-925-6598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

**Richemont North America, Inc.  
as of March 12, 2007**

**OFFICER INFORMATION**

<u>Name</u>	<u>Title</u>	<u>Residence Address</u>	<u>Business Address</u>
Daniel C. Mawicke	President & C.E.O.	4 Echo Woods Circle Northbrook Condo Monroe, CT 06468	645 Fifth Ave. New York, NY 10022
Kevin Byrne	Chief Financial Officer V.P. Finance	16 Taunton Lane Newtown, CT 06470	Three Enterprise Drive Ste 300 Shelton, CT. 06484
Helen O'Shaughnessy	Secretary	8294 61st. Road Middle Village, NY 11379	645 Fifth Ave. New York, NY 10022
Rosa Maceira	V.P. Human Resources	13 Garfield Place Poughkeepsie, NY 12601	645 Fifth Ave. New York, NY 10022
Denis Jaquenoud	Assistant V.P. After Sales Service and Logistics	8 Clark Court Larchmont, NY 10538	645 Fifth Ave. New York, NY 10022

**ATTACHMENT**

40121113

#837007

**DIRECTOR'S INFORMATION**

<u>Name</u>	<u>Title</u>	<u>Residence Address</u>	<u>Business Address</u>
Gary A. Saage, Jr	Chairman	34 Chemin des Mollies CH-1293 Bellevue Geneva Switzerland	50, Chemin de la Chenate 1293 Bellevue Geneva Switzerland
Albert Kaufmann	Director	51 rue Francois 1er Paris, France	51 rue Francois 1er Paris, France
Richard Lepeu	Director	51 rue Francois 1er Paris, France	51 rue Francois 1er Paris, France
Daniel C. Mawicke	Director	4 Echo Woods Circle Northbrook Condo Monroe, CT 06468	645 Fifth Ave. New York, NY 10022