


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 08:00 AM
Secretary of State

DOCUMENT # F00000003956
 1. Entry Name
 CLICQUOT, INC.



Principal Place of Business Mailing Address
 TWO PARK AVENUE TWO PARK AVENUE
 NEW YORK, NY 10016 NEW YORK, NY 10016

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02132006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 68-0056653 Not Applicable

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

6. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301

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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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

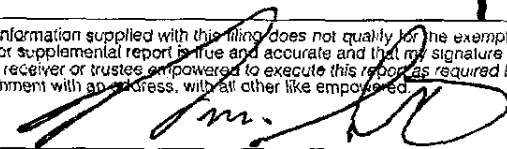
10. OFFICERS AND DIRECTORS

TITLE	TDCE
NAME	GUILIANO, MIRELLE
STREET ADDRESS	9 PRINCETON DR.
CITY-ST-ZIP	DIX HILLS, NY 11746
TITLE	SVTD
NAME	SAWITSKY, WALTER M.
STREET ADDRESS	44 TOWNLINE CT.
CITY-ST-ZIP	HAUPPAUGE, NY 11788
TITLE	S
NAME	FIRESTONE, LOUISE
STREET ADDRESS	336 CENTRAL PARK W.
CITY-ST-ZIP	NEW YORK, NY 10025
TITLE	COBD
NAME	BONNEFOND, CECILE
STREET ADDRESS	9 BIS RUE LA LO
CITY-ST-ZIP	PARIS FRANCE, 75116
TITLE	D
NAME	MONNET, GERARD
STREET ADDRESS	36 RUE LEGER BERTIN
CITY-ST-ZIP	EPERNAY FRANCE, 51200
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000476065
 04/05/06-80042-009 150.00

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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:  2/15/06 (20) 888-7575
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

WALTER M. SAWITSKY, SENIOR VICE PRESIDENT, FINANCE & OPERATIONS