

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000004338

FILED  
Oct 12, 2007  
Secretary of State

Entity Name: MICHAEL KORS RETAIL, INC.

**Current Principal Place of Business:**

11 WEST 42ND STREET  
NEW YORK, NY 10036

**New Principal Place of Business:**

**Current Mailing Address:**

11 WEST 42ND STREET  
NEW YORK, NY 10036

**New Mailing Address:**

333 MEADOWLANDS PKWY 4TH FLOOR  
ATTN: CONTROLLER  
SECAUCUS, NJ 07094

FEI Number: 52-2454584      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MARK EPPLEY, V.P.

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: IDOL, JOHN D  
Address: 11 WEST 42ND STREET, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

Title: VTD ( ) Delete  
Name: PARSONS, JOSEPH B  
Address: 11 WEST 42ND STREET, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

Title: VS ( ) Delete  
Name: SPORN, LEE S  
Address: 11 WEST 42ND STREET, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

Title: V ( ) Delete  
Name: LENTINI, LAURA  
Address: 11 WEST 42ND STREET, 20TH FLOOR  
City-St-Zip: NEW YORK, NY 10036

**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  
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: LAURA LENTINI

SVP

10/12/2007

Electronic Signature of Signing Officer or Director

Date