

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004760

FILED
Mar 16, 2004
Secretary of State

Entity Name: L'OCCITANE, INC.

Current Principal Place of Business:

10 E 29TH ST
NEW YORK, NY 10016

New Principal Place of Business:

10 EAST 39TH STREET
NEW YORK, NY 10016

Current Mailing Address:

10 E 29TH ST
NEW YORK, NY 10016

New Mailing Address:

10 EAST 39TH STREET
NEW YORK, NY 10016

FEI Number: 13-3844764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: GEIGER, REINOLD
Address: 2-1 ST. MAURICE, BP 307
City-St-Zip: MANOSQUE, FRANCE, 04103,

Title: V () Delete
Name: GUINARO, STEPHANIE
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016

Title: T () Delete
Name: POISNEL, WILFRID
Address: 10 EAST 39TH STREET, 8TH FLOOR
City-St-Zip: NEW YORK, NY 10016

Title: EVP () Delete
Name: HIBON, DELPHINE
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GEIGER, REINOLD
Address: 2-1 ST. MAURICE, BP 307
City-St-Zip: MANOSQUE, 04103 FRANCE, FR 04103 FR

Title: V (X) Change () Addition
Name: GUINARD, STEPHANIE
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016 US

Title: T (X) Change () Addition
Name: CAMBOURS, FRANCOIS
Address: 10 EAST 39TH STREET, 8TH FLOOR
City-St-Zip: NEW YORK, NY 10016 US

Title: SD (X) Change () Addition
Name: BRADEN, NICK
Address: 10 E 39TH ST, 8TH FL
City-St-Zip: NY, NY 10016 US

Title: D () Change (X) Addition
Name: HENRI, BIARD
Address: 2-1 ST. MAURICE, BP 307
City-St-Zip: MANOSQUE, 04103 FRANCE, FR 04103 FR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAMBOURS FRANCOIS

T

03/16/2004

Electronic Signature of Signing Officer or Director

_____ Date