

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**May 16 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # P31217 (3)**

1. Corporation Name  
**ALBERTO-CULVER USA, INC.**



Principal Place of Business  
**2525 ARMITAGE AVENUE  
 MELROSE PARK IL 60160**

Mailing Address  
**2525 ARMITAGE AVENUE  
 MELROSE PARK IL 60160-1125**

3. Date Incorporated or Qualified <b>10/05/1990</b>		3a. Date of Last Report <b>05/01/1996</b>	
4. FEI Number <b>36-3664158</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip 30 Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>CD</b>	<input type="checkbox"/> DELETE
NAME	<b>LAVIN, LEONARD H.</b>	
STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>	
CITY-ST-ZIP	<b>MELROSE PARK IL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BERNICK, HOWARD B.</b>	
STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>	
CITY-ST-ZIP	<b>MELROSE PARK IL</b>	
TITLE	<b>VST</b>	<input type="checkbox"/> DELETE
NAME	<b>LAVIN, BERNICE E.</b>	
STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>	
CITY-ST-ZIP	<b>MELROSE PARK IL</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>LAVIN, BERNICE E.</b>	
STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>	
CITY-ST-ZIP	<b>MELROSE PARK IL</b>	
TITLE	<b>VAS</b>	<input type="checkbox"/> DELETE
NAME	<b>BERNICK, CAROL L.</b>	
STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>	
CITY-ST-ZIP	<b>MELROSE PARK IL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1,1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1,2 NAME	
1,3 STREET ADDRESS	
1,4 CITY-ST-ZIP	
2,1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2,2 NAME	
2,3 STREET ADDRESS	
2,4 CITY-ST-ZIP	
3,1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3,2 NAME	<b>VST/D LAVIN, BERNICE E.</b>
3,3 STREET ADDRESS	<b>2525 ARMITAGE AVE.</b>
3,4 CITY-ST-ZIP	<b>MELROSE PARK, IL</b>
4,1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4,2 NAME	
4,3 STREET ADDRESS	
4,4 CITY-ST-ZIP	
5,1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5,2 NAME	<b>PRESIDENT BERNICK, CAROL L.</b>
5,3 STREET ADDRESS	<b>2525 ARMITAGE AVE</b>
5,4 CITY-ST-ZIP	<b>MELROSE PARK IL 60160</b>
6,1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6,2 NAME	<b>SEE ATTACHED FOR ADDITIONAL OFFICERS AND DIRECTORS</b>
6,3 STREET ADDRESS	
6,4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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

CR2E034 (9/96)

**ALBERTO-CULVER U.S.A., INC.  
FEIN: 36-3664158  
STATE OF FLORIDA**

**LIST OF OFFICERS AND DIRECTORS**

OFFICERS OF ALBERTO-CULVER USA, INC.

NAME	TITLE
Carol L. Bernick	President
David D. DeTomaso	Senior Vice President, Professional Domestic Division
Bernice E. Lavin	Vice President, Secretary - Treasurer
John Boone	Group Vice President, Consumer Products
Anthony J. Borgese	Vice President, Sales, Toiletries Division
Andrew C. Langert	Vice President, Finance
James J. Chickarello	Vice President, Manufacturing and Engineering
Kristin Muntean	Vice President, General Mgr, Household/Grocery Div.
Janice J. Miller	Vice President, Market Research
Raymond A. Maslanka	Vice President, Operations
Doug Meneely	Vice President, Human Resources
Richard N. Paulsen	Vice President, Information Services
Daniel B. Stone	Vice President, Communications
Michael J. Stangel	Vice President, Professional Division

BOARD OF DIRECTORS OF ALBERTO-CULVER U.S.A., INC.

Leonard H. Lavin	
Bernice E. Lavin	
Howard B. Bernick	

THE BUSINESS ADDRESS FOR ALL OF THE ABOVE OFFICERS AND DIRECTORS IS:

2525 Armitage Avenue, Melrose Park, IL 60160