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

Mailing Address

WPAVIA & HARCOURT

600 MADISON AVE., 12TH FLOOR

NEW YORK NY 10022-1653

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 21 1997 8:00am

Secretary of State

3a. Date of Last Report

05/31/1996

3. Date Incorporated or Qualified

05-13-97

212-4621151

12/08/1994

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400006260 (3)

PRESIDIO RETAIL, INC.

Principal Place of Business

% A/X ARMANI EXCHANGE

55 FIFTH AVE. NEW YORK NY 10003

2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 13-3798240 %A/X ARMANI EXCHANGE Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 55 FIFTH AVENUE City & State City & State 6. Election Campaign Financing \$5.00 May Be NEW YORK, NEW YORK Trust Fund Contribution Added to Fees 23 Zφ Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 29 10003 25 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE PRENTICE HALL CORPORATION SYSTEM 81 Name 1201 HAYS ST., #105 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 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 Signature, typed or printed hame of registered agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)Change نے DELETE Addition 1.1 TITLE HILE HENG, BERNARD 1.2 NAME NAME 241 KENSINGTON HIGH ST. 13 STREET ADDRESS STREET ADDRESS LONDON, ENGLAND W86SA CITY - ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition THEF 21 TITLE GRAPSTEIN, STEVEN 2.2 NAME NAME 767 3RD AVE. STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY 10017** 2.4 CITY-ST-ZIP CHY-S1-ZIP DELETE Change Addition 3.1 TITLE TITLE ONG. B S 3.2 NAME NAME 50 CUSCADEN RD., HPL HOUSE 3.3 STREET ADDRESS STREET ADDRESS 08-01 SINGAPORE 3.4. CITY - ST-2IP CHY-ST-ZIP DELETE Addition 41 TOLE THEF MCNALLY, RICHARD 4. 2 NAME 3739 CLAY ST. STREET ADDRESS 4.3 STREET ADDRESS SAN FRANCISCO CA 10011 4.4 CITY-ST-ZIP CHY- \$1- ZIP DELETE Change Addition 5.1 TITLE TIFLE KALBERER, PATRICIA 5.2 NAME NAME 114 5TH AVE. 5.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10011** 5.4 CITY - ST - ZIP City-St-ZP DELETE Change Addition 6.1 TITLE Dist Wong, victor 62 NAME NAME 55 FIFTH AVE. **63 STREET ADDRESS** STREET ADDRESS. **NEW YORK NY 10003** 64 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