


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000005256 1. Entity Name LVMH WATCH & JEWELRY USA, INC.	
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Principal Place of Business 966 S SPRINGFIELD AVE. SPRINGFIELD, NJ 07081	Mailing Address 966 S SPRINGFIELD AVE. SPRINGFIELD, NJ 07081
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01252005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-3040242	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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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 reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP LALONDE, DANIEL 966 S SPRINGFIELD AVE. SPRINGFIELD, NJ 07081
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BABIN, JC 966 S SPRINGFIELD AVE. SPRINGFIELD, NJ 07081
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D INGRAM, BRUCE G 19 EAST 57TH ST. NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO ARTAUD, CHRISTOPHE 966 S SPRINGFIELD AVE SPRINGFIELD, NJ 07081
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP FOLKMAN, MICHAEL 19 EAST 57TH ST. NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FIRESTONE, LOUISE 19 EAST 57TH ST. NEW YORK, NY 10022

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Louise Firestone Secretary (212) 931-2707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #