

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 240627

**Entity Name:** ELIZABETH ARDEN, INC.

**Current Principal Place of Business:**

880 SOUTHWEST 145TH AVE.  
SUITE 200  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

C/O REVLON, 2147 ROUTE 27  
EDISON, NJ 08818 US

**FEI Number:** 59-0914138

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 US

*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

**Officer/Director Detail :**

Title DIRECTOR  
Name DOLAN, VICTORIA  
Address C/O REVLON, INC.  
ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title VP  
Name DOLAN, VICTORIA  
Address C/O REVLON, INC.  
ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR  
Name NESS, ELY-BAR  
Address C/O REVLON, INC.  
ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title VP, CHIEF COMPLIANCE OFFICER  
Name FITZSIMMONS, MEAGAN  
Address C/O REVLON, INC.  
ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title PRESIDENT  
Name PERELMAN, DEBBIE  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title VP, TREASURER  
Name KENNEL, JEFFREY  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title VP, SECRETARY  
Name FU, GRACE  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR  
Name SANKAR, RAVI  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

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*I hereby 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 all other like empowered.*

**SIGNATURE:** GRACE FU

VP, SECRETARY

04/30/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP, ASST. SECRETARY  
Name GERBER, ALEXANDRA  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title ASST. SECRETARY  
Name SHEA, LIZ  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title ASST. SECRETARY  
Name ROVIRA, JOSEP MARIA  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title VP, ASST. SECRETARY  
Name ROSENTHAL, STEVEN  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title ASST. SECRETARY  
Name CUESTA, YAGO  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004