

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 315500

Entity Name: PERRY ELLIS INTERNATIONAL, INC.

Current Principal Place of Business:

3000 NW 107TH AVENUE
MIAMI, FL 33172

Current Mailing Address:

3000 NW 107TH AVENUE
MIAMI, FL 33172 US

FEI Number: 59-1162998

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC
1200 SOUTH PINE ISLAND ROAD
MIAMI, FL 33324 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 PRESIDENT, DIRECTOR
Name FELDENKREIS, OSCAR
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title SECRETARY
Name SHADE, CORY
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title CFO
Name BRITT, ANITA
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title CHAIRMAN/DIRECTOR
Name FELDENKREIS, GEORGE
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title DIRECTOR
Name DEFLORIO, JANE
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title DIRECTOR
Name ARRIOLA, JOE
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title DIRECTOR
Name KLATSKY, BRUCE
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title DIRECTOR
Name RAYDEN, MICHAEL
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

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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: GEORGE FELDENKREIS

CHAIRMAN

04/05/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SCHEINER, DAVID
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172

Title DIRECTOR
Name WILSON, ALEXANDRA
Address 3000 NW 107TH AVENUE
City-State-Zip: MIAMI FL 33172