## **2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 822088** 

Entity Name: ROUX LABORATORIES, INC.

**Current Principal Place of Business:** 

5344 OVERMYER DRIVE JACKSONVILLE, FL 32254

**Current Mailing Address:** 

2147 RT 27 C/O TAX DEPT. EDISON, NJ 08817 US

FEI Number: 13-1537427 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

**FILED** Apr 12, 2022

**Secretary of State** 

0891114817CC

## Officer/Director Detail:

Title	SECRETARY	Title	PRESIDENT
Name	ROBINSON, CARI	Name	PERELMAN, DEBRA
Address	ONE NEW YORK PLAZA	Address	ONE NEW YORK PLAZA
City-State-Zip:	NEW YORK NY 10004	City-State-Zip:	NEW YORK NY 10004

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

Title ASST. SECRETARY Title VP & CHIEF COMPLIANCE OFFICER

Name SHEA, LIZ Name HINDS-PEARL, ALISON

Address ONE NEW YORK PLAZA Address ONE NEW YORK PLAZA City-State-Zip: NEW YORK NY 10004 City-State-Zip: NEW YORK NY 10004

**DIRECTOR** Title VP, ASST. SECRETARY Name NESS, ELY-BAR Name GERBER, ALEXANDRA Address ONE NEW YORK PLAZA Address ONE NEW YORK PLAZA

City-State-Zip: NEW YORK NY 10004 City-State-Zip: NEW YORK NY 10004

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Title

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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.

04/12/2022 SIGNATURE: DENISE WALSH VP, TAX

## Officer/Director Detail Continued:

Title DIRECTOR
Name SANKAR, RAVI

Address ONE NEW YORK PLAZA
City-State-Zip: NEW YORK NY 10004

Title VP, TAX

Name WALSH, DENISE

Address 2147 RT 27

C/O TAX DEPT.

City-State-Zip: EDISON NJ 08817

Title ASST. SECRETARY

Name ROVIRA, JOSEP MARIA

Address 1 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 1 NEW YORK PLAZA
City-State-Zip: NEW YORK NY 10004