

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004338

Entity Name: MICHAEL KORS RETAIL, INC.**Current Principal Place of Business:**11 WEST 42ND STREET
NEW YORK, NY 10036**Current Mailing Address:**1 MEADOWLANDS PLAZA, 12FL
EAST RUTHERFORD, NJ 07073 US**FEI Number:** 52-2454584**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, 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 DIRECTOR
Name IDOL, JOHN D.
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title CFO
Name EDWARDS, THOMAS J. JR.
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title TREASURER
Name EDWARDS, THOMAS J. JR.
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title SECRETARY
Name MCDONOUGH, KRISTA
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title CEO
Name IDOL, JOHN D.
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title PRESIDENT
Name IDOL, JOHN D.
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

Title TREASURER
Name PROVENZANO, DAVID
Address 11 WEST 42ND STREET
City-State-Zip: NEW YORK NY 10036

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: DAVID PROVENZANO**TREASURER****04/26/2024**

Electronic Signature of Signing Officer/Director Detail

Date