

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000002730

**Entity Name:** OFFICINA PROFUMO FARMACEUTICA DI SANTA MARIA  
NOVELLA OF AMERICA CORPORATION

**FILED**  
**Apr 03, 2024**  
**Secretary of State**  
**9551376280CC**

**Current Principal Place of Business:**

66 WHITE STREET  
SUITE 501  
NEW YORK, NY 10013

**Current Mailing Address:**

66 WHITE STREET  
SUITE 501  
NEW YORK, NY 10013 US

**FEI Number: 47-3331310**

**Certificate of Status Desired: No**

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

UNITED CORPORATE SERVICES, INC.  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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            PAOLONI, GIOVANNA  
Address        66 WHITE STREET  
                  SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            SECRETARY  
Name            GAZZOLA, MARIO  
Address        66 WHITE STREET  
                  SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            EXECUTIVE VICE PRESIDENT  
Name            NEMEREVER, ELYSE  
Address        66 WHITE STREET  
                  SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            TREASURER  
Name            CIPOLETTI, MONICA  
Address        66 WHITE STREET  
                  SUITE 501  
City-State-Zip: NEW YORK NY 10013

*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: MARIO GAZZOLA**

**SECRETARY**

**04/03/2024**

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

\_\_\_\_\_  
Date