2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000003625

Entity Name: THE LABORATORY INSTITUTE OF MERCHANDISING, INC.

FILED Mar 16, 2021 **Secretary of State** 2035962567CC

Current Principal Place of Business:

12 EAST 53RD STREET NEW YORK. NY 10022-5268

Current Mailing Address:

12 EAST 53RD STREET NEW YORK, NY 10022-5268

FEI Number: 13-5579528 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI 200 S. BISCAYNE BOULEVARD SUITE 4100 (RLB) MIAMI, FL 33131 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	C. D	Title	VC. D

Name BORNER, WILLIAM J. Name NEFF, ROSALIND S. Address 12 EAST 53RD STREET Address 12 EAST 53RD STREET City-State-Zip: NEW YORK NY 10022-5268 City-State-Zip: NEW YORK NY 10022-5268

Title **EVPTAS** Title P. D

Name DONOHUE, MICHAEL Name MARCUSE, ELIZABETH Address 12 EAST 53RD STREET Address 12 EAST 53RD STREET NEW YORK NY 10022-5268 City-State-Zip: NEW YORK NY 10022-5268 City-State-Zip:

Title Title

Name FARMER, PATTY Name CRAWFORD, SALLY A.

Address 12 EAST 53RD STREET Address 12 EAST 53RD STREET

City-State-Zip: NEW YORK NY 10022-5268 City-State-Zip: NEW YORK NY 10022-5268

Title D Title D

Name MARSHALL, NANCY Name HOROWITZ, JAY R. Address 12 EAST 53RD STREET Address 12 EAST 53RD STREET NEW YORK NY 10022-5268 City-State-Zip:

City-State-Zip: NEW YORK NY 10022-5268

Continues on page 2

EVP

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: MICHAEL DONOHUE

Electronic Signature of Signing Officer/Director Detail

03/16/2021

Date

Officer/Director Detail Continued:

Title D Title D

NameROTHWELL, GAIL E.NameSHAFFER, STEFANAddress12 EAST 53RD STREETAddress12 EAST 53RD STREET

City-State-Zip: NEW YORK NY 10022-5268 City-State-Zip: NEW YORK NY 10022-5268

Title D Title

Name REICHOLUM, BILL Name MARSHALL, RON

Address 12 EAST 53RD STREET Address 12 EAST 53RD STREET

City-State-Zip: NEW YORK NY 10022-5268 City-State-Zip: NEW YORK NY 10022-5268