

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000006924

**Entity Name:** COSMETICS OF FRANCE, INC.**Current Principal Place of Business:**100 NORTH BISCAYNE BLVD  
STE 2400  
MIAMI, FL 33132**Current Mailing Address:**19 EAST 57TH ST.  
LEGAL-5TH FLOOR  
NEW YORK, NY 10022 US**FEI Number:** 13-3531601**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            GOULART GONCALVES, ALBERTO LUIZ  
Address        100 NORTH BISCAYNE BLVD., STE 2400  
City-State-Zip: MIAMI FL 33132

Title            S  
Name            FIRESTONE, LOUISE  
Address        19 EAST 57TH STREET  
City-State-Zip: NEW YORK NY 10022

Title            CHIEF FINANCIAL OFFICER  
Name            DE GELAS, BENJAMIN  
Address        100 NORTH BISCAYNE BLVD STE 2400  
City-State-Zip: MIAMI FL 33132

Title            DIRECTOR  
Name            MARTINEZ, CLAUDE  
Address        33 AVENUE HOCHÉ  
City-State-Zip: PARIS FRANCE 75008

Title            VP  
Name            JOHNSON, MAUREEN  
Address        19 EAST 57TH STREET  
City-State-Zip: NEW YORK NY 10022

Title            DIRECTOR  
Name            MELWANI, ANISH  
Address        19 EAST 57TH STREET  
City-State-Zip: NEW YORK NY 10022

*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:** LOUISE FIRESTONE**SECRETARY****01/03/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date