

**2017 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	DP
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	MANAGER
Name	MELWANI, ANISH
Address	19 EAST 57TH ST. LEGAL-5TH FLOOR
City-State-Zip:	NEW YORK NY 10022

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

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****01/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date