

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000005333

**FILED**  
**Jan 10, 2017**  
**Secretary of State**  
**CC3448605940**

**Entity Name:** DESIGNER FRAGRANCES & COSMETICS COMPANY

**Current Principal Place of Business:**

10 HUDSON YARDS  
NEW YORK, NY 10001

**Current Mailing Address:**

50 CONNELL DRIVE  
BERKELEY HEIGHTS, NJ 07922

**FEI Number: 22-3419910**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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           CEOP  
Name           ROZE, FREDERIC  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

Title           EVP  
Name           DOLDEN, ROGER  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

Title           CFO  
Name           PAGLIANO, ALEXANDRE  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

Title           SVP  
Name           RABINOWITZ, ROY  
Address        50 CONNELL DRIVE  
City-State-Zip: BERKELEY HEIGHTS NJ 07922

Title           T  
Name           ELVEDT, ANTHONY  
Address        10 HUDSON YARDS  
City-State-Zip: NY NY 10001

Title           SVP, GENERAL COUNSEL &  
SECRETARY  
Name           SARAKATSANNIS, THOMAS  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

Title           VP & ASSISANT SECRETARY  
Name           GIGLIOTTI, LISA M  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

Title           ASSISTANT VP & ASSISTANT  
SECRETARY  
Name           KINALLY, ROBERT G  
Address        10 HUDSON YARDS  
City-State-Zip: NEW YORK NY 10001

*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: ROY RABINOWITZ**

**SVP**

**01/10/2017**

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

\_\_\_\_\_  
Date