

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10063

Entity Name: AVON PRODUCTS, INC.**Current Principal Place of Business:**1 AVON PLACE
SUFFERN, NY 10901**Current Mailing Address:**1 AVON PLACE
SUFFERN, NY 10901 US**FEI Number:** 13-0544597**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 ASSISTANT SECRETARY
Name PAUL, JOHN
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title VP
Name EDWARDS, GINNY
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title CORPORATE SECRETARY
Name EDWARDS, GINNY
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title VP, GLOBAL TAX
Name SIDERS, LISA
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title GENERAL COUNSEL
Name EDWARDS, GINNY
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title DIRECTOR
Name FILHO, ITAMAR GAINO
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title DIRECTOR
Name MARQUES, ROBERTO DE OLIVEIRA
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title CEO
Name CRETU, ANGELA
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

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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: JOHN PAUL**ASSISTANT SECRETARY 04/09/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CRETU, ANGELA
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title CFO
Name ROGBERG, CARL
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title VP OF PEOPLE, CULTURE AND ORGANIZATION
Name PARCZUK, MICHELLE
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title ASSISTANT CORPORATE SECRETARY
Name ABRAVANEL, KAREN
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title DIRECTOR
Name STRANO CASTELLAN, GUILHERME
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title PRINCIPAL ACCOUNTING OFFICER
Name HUTCHISON, SAMANTHA
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901

Title TREASURER
Name LAWAREE, BRUNO
Address 1 AVON PLACE
City-State-Zip: SUFFERN NY 10901