## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39551

Entity Name: BULGARI CORPORATION OF AMERICA

**Current Principal Place of Business:** 

555 MADISON AVENUE 9TH FLOOR

NEW YORK, NY 10022

**Current Mailing Address:** 

555 MADISON AVENUE, 9TH FLOOR 9TH FLOOR

NEW YORK, NY 10022 US

FEI Number: 13-3351199 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR., SUITE A 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: ADAM SALDANA, ASST. SECRETARY 04/19/2019

Electronic Signature of Registered Agent

Date

**FILED** Apr 19, 2019

**Secretary of State** 

5138165850CC

Officer/Director Detail:

Title **TREASURER** Title D/S

Name LEGAIE. CHRISTOPHE Name LOUISE, FIRESTONE Address 555 MADISON AVENUE Address 19 EAST 57TH STREET

9TH FLOOR

NEW YORK NY 10022 City-State-Zip:

Title **AUTHORIZED REPRESENTATIVE -**Title **PRESIDENT** 

CONTROLLER

City-State-Zip:

NEW YORK NY 10022

ARIELLE, POGNON PALTRIDGE, DANIEL Name Name 555 MADISON AVENUE 555 MADISON AVE Address Address

9TH FLOOR

9TH FLOOR

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

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: ARIELLE POGNON

**AUTHORIZED** REPRESENTATIVE 04/19/2019