2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002584

9 RUE ROYALE

75008 PARIS, FRANCE, NW

Address:

City-St-Zip:

Entity Name: CHRISTOFLE SILVER, INC.

FILED Sep 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11 EAST 26TH ST 15 FLOOR NEW YORK, NY 10010 **New Mailing Address: Current Mailing Address:** 11 EAST 26TH ST 15 FLOOR NEW YORK, NY 10010 FEI Number: 13-1871909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATE 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KRAFFT, NICOLAS Name: Name: 11 EAST 26TH ST, 15TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10010 City-St-Zip: () Delete ٧S Title: Title: () Change () Addition Name: GERARD, VIRGINIA Name: 11 EAST 26TH ST, 15TH FLOOR Address: Address: NEW YORK, NY 10010 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PRICE, WALTER Name: Name: 11 EAST 26TH ST., 15TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10010 City-St-Zip: Title: () Delete Title: (X) Change () Addition ORIEZ, THEIRY ORIEZ, THIERY Name: Name: Address: 9 RUE ROYALE Address: 9 RUE ROYALE City-St-Zip: 75008 PARIS, FRANCE, City-St-Zip: PARIS, FRANCE, NA 75008 FR Title: Title: (X) Change () Addition () Delete ALVES-PIERES, PEDRO ALVES-PIRES, PEDRO Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

9 RUE ROYALE

PARIS, FRANCE, NA 75008 FR

SIGNATURE: WALTER PRICE VT 09/23/2009