## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000003523

Entity Name: MICHAEL KORS (USA), INC.

FILED Jan 06, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 11 WEST 42ND ST NEW YORK, NY 10036 **Current Mailing Address: New Mailing Address:** 11 WEST 42ND ST NEW YORK, NY 10036 FEI Number: 06-1665964 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: NATIONSCORP REGISTERED AGENTS, INC 525 E. PARK AVENUE 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: ALISON HAND, ASSISTANT SECRETARY 01/06/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition PARSONS, JOSEPH B Name: Name: 11 WEST 42ND ST, 20TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10036 City-St-Zip: Title: Title: () Delete () Change () Addition IDOL, JOHN Name: Name: 11 WEST 42ND ST, 20TH FLOOR Address: Address: NEW YORK, NY 10036 City-St-Zip: City-St-Zip: Title: Title: SVPC ( ) Delete () Change () Addition LENTINI, LAURA Name: Name: 11 WEST 42ND ST, 20TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10036 City-St-Zip: Title: (X) Delete Title: () Change () Addition WITKOWSKI, DON Name: Name: Address: 11 WEST 42ND ST, 20TH FLOOR Address: City-St-Zip: NEW YORK, NY 10036 City-St-Zip: Title: (X) Delete Title: () Change () Addition CASTROGIOVANNI, GIA Name: Name: 11 WEST 42ND ST. 20TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10036 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: BAKST, ANNA Name: 11 WEST 42ND ST, 20TH FLOOR Address: Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10036

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: LAURA LENTINI **SVPC** 01/06/2006 Date