

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007013

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: MOET HENNESSY USA, INC.

**Current Principal Place of Business:**

85 TENTH AVENUE  
NEW YORK, NY 10011

**New Principal Place of Business:**

**Current Mailing Address:**

85 TENTH AVENUE  
NEW YORK, NY 10011

**New Mailing Address:**

FEI Number: 13-5371790      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CORNELL, MARK R  
Address: 216 E. 18TH ST. - APT. #2  
City-St-Zip: NEW YORK, NY 10003

Title: D ( ) Delete  
Name: INGRAM, BRUCE G  
Address: 19 EAST 57TH STREET - 5TH FL.  
City-St-Zip: NEW YORK, NY 10022

Title: V/S ( ) Delete  
Name: KELLY, MICHAEL T  
Address: 4 PARK AVENUE  
City-St-Zip: CROTON ON HUDSON, NY 10520

Title: V/T ( ) Delete  
Name: DOWELL, CARL  
Address: 185 E. 85TH ST.  
City-St-Zip: NEW YORK, NY 10028

Title: V ( ) Delete  
Name: BURNET, THOMAS P  
Address: 41 HILLS DRIVE  
City-St-Zip: BELLE MEAD, NJ 08502

Title: D ( ) Delete  
Name: HENNESSY, GILLES  
Address: 7 BIS RUE LALO  
City-St-Zip: PARIS, FRANCE, FR 75016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CORNELL, MARK R  
Address: 55 GREENE ST. - 2ND FL.  
City-St-Zip: NEW YORK, NY 10013

Title: D (X) Change ( ) Addition  
Name: CARPENTIER, PASCAL  
Address: 19 EAST 57TH STREET - 5TH FL.  
City-St-Zip: NEW YORK, NY 10022

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: CLERKIN, JIM  
Address: 64 CROSS HIGHWAY  
City-St-Zip: WESTPORT, CT 06880

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MICHAEL T. KELLY

V/S

02/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date