## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000002397

Entity Name: FENDI NORTH AMERICA, INC.

FILED Apr 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 720 FIFTH AVENUE, 5TH FLOOR NEW YORK, NY 10019 **Current Mailing Address: New Mailing Address:** 720 FIFTH AVENUE, 5TH FLOOR NEW YORK, NY 10019 FEI Number: 13-3485176 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: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete () Change () Addition BURKE, MICHAEL Name: Name: 720 FIFTH AVENUE, 5TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10019 City-St-Zip: Title: Title: () Delete () Change () Addition Name: FLORE, GIANLUCA Name: 720 FIFTH AVENUE, 5TH FLOOR Address: Address: NEW YORK, NY 10019 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete FENDI, CARLA FORTUNATO, PHILLIPPE Name: Name: 720 FIFTH AVENUE, 5TH FLOOR 720 FIFTH AVENUE, 5TH FLOOR Address: Address: NEW YORK, NY 10019 City-St-Zip: NEW YORK, NY 10019 City-St-Zip: Title: () Delete Title: () Change () Addition TOLEDANO, SIDNEY Name: Name: Address: 720 FIFTH AVENUE, 5TH FLOOR Address: City-St-Zip: NEW YORK, NY 10019 City-St-Zip: Title: Title: () Delete () Change () Addition KOLANDA, KATHRYN Name: Name: 19 EAST 57TH STREET Address: Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: Title: (X) Delete Title: () Change () Addition PFISTNER, PATRICE Name: Name: Address: 625 MADISON AVE Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10022

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: NICHOLAS ATOCHA TAX 04/02/2007