

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000094

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: PARFUMS GIVENCHY WHD, INC.

## Current Principal Place of Business:

1200 BRICKELL AVE  
1500  
MIAMI, FL 33131

## New Principal Place of Business:

100 NORTH BISCAYNE AVE  
2400  
MIAMI, FL 33132

## Current Mailing Address:

19 EAST 57TH STREET  
5TH FLOOR -LEGAL  
NEW YORK, NY 10022 US

## New Mailing Address:

FEI Number: 65-0375360      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 32301 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: D ( ) Delete  
Name: LORENZO, ALAIN  
Address: 1200 BRICKELL AVE  
City-St-Zip: MIAMI, FL 33131

Title: P ( ) Delete  
Name: DURAND, THIERRY  
Address: 1200 BRICKELL AVE  
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete  
Name: FIRESTONE, LOUISE  
Address: 19 EAST 57TH STREET  
City-St-Zip: NEW YORK, NY 10022

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LORENZO, ALAIN  
Address: 100 NORTH BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33132

Title: P (X) Change ( ) Addition  
Name: BRITTO, EVELYSE  
Address: 100 NORTH BISCAYNE BLVD  
City-St-Zip: MIAMI, FL 33132

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

Title: VP ( ) Change (X) Addition  
Name: JOHNSON, MAUREEN  
Address: 19 EAST 57TH STREET  
City-St-Zip: NEW YORK, NY 10022

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: LOUISE FIRESTONE

S

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date