2001 UNIFORM BUSINESS REPORT (UBR)

Apr 05, 2001 8:00 am Secretary of State DOCUMENT # F9400006313 1. Entity Name PRESIDIO INTERNATIONAL, INC. 04-05-2001 90036 032 ***150.00 Mailing Address Principal Place of Business ARMANI EXCHANGE PRESIDIO INTERNATIONAL 100413 55 FIFTH AVE. 55 FIFTH AVE, 16TH FLOOR NEW YORK NY 10003 NEW YORK NY 10003 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 13-3785695 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) SUITE 105 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code City 8. 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE D ☐ Delete TITLE NAME NAME ONG. B.S. STREET ADDRESS 50 CUSADEN RD., HPL HOUSE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SINGAPORE 08-01 ☐ Addition TITLE Change TITLE ☐ Delete NAME NAME GRAPSTEIN, STEVEN STREET ADDRESS STREET ADDRESS 767 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10017** Change ☐ Addition ☐ Delete TITLE D TITLE KALBERGER, PATRICIA NAME NAME STREET ADDRESS STREET ADDRESS 114 FIFTH AVENUE CITY-ST-ZIP CITY - ST - ZIP **NEW YORK NY** ☐ Addition ☐ Delete TITLE DITER NAME NAME WONG, VICTOR STREET ADDRESS STREET ADDRESS 55 FIFTH AVE. CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10003 ☐ Delete Change Addition TITLE TITLE VD NAME NAME HENG, BERNARD STREET ADDRESS STREET ADDRESS 241 KENSINGTON HIGH ST. CITY-ST-ZIP CITY-ST-7IP LONDON, ENGLAND W86SA Delete TITLE ☐ Change ☐ Addition TITLE NAME WONG, VICTOR NAME STREET ADDRESS STREET ADDRESS 55 FIFTH AVENUE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

NEW YORK NY 10003

CITY-ST-ZIP