

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90010 050 \*\*\*150.00

05/6705 AT

**DOCUMENT # F96000005419**

1. Entity Name

**BOBBI BROWN PROFESSIONAL COSMETICS SERVICES INC.**

Principal Place of Business

**600 MADISON AVE  
 NY NY 10022**

Mailing Address

**7 CORPORATE CENTER DR  
 ATTN TAX DPT  
 MELVILLE NY 11747  
 US**

00020501



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**11-3315192**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DCEO** ☐ Delete  
 NAME **BROWN, BOBBI**  
 STREET ADDRESS **787 FIFTH AVENUE**  
 CITY-ST-ZIP **NY NY 10022**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **DP** ☐ Delete  
 NAME **LANDIS, ROSALIND**  
 STREET ADDRESS **787 FIFTH AVENUE**  
 CITY-ST-ZIP **NY NY 10022**

TITLE ☐ Change ☐ Addition  
 NAME ☒ Change ☐ Addition  
 STREET ADDRESS **7 Corporate Center Drive**  
 CITY-ST-ZIP **Melville, NY 11747**

TITLE **VPTR** ☐ Delete  
 NAME **GIBIAN, GERALD Z**  
 STREET ADDRESS **7 CORPORATE CENTER DR**  
 CITY-ST-ZIP **MELVILLE NY 11747**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **CFO** ☐ Delete  
 NAME **KUNES, RICHARD**  
 STREET ADDRESS **7 CORPORATE CENTER DR**  
 CITY-ST-ZIP **MELVILLE NY 11747**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **S** ☐ Delete  
 NAME **KONNEY, PAUL E**  
 STREET ADDRESS **7 CORPORATE CENTER DRIVE**  
 CITY-ST-ZIP **MELVILLE NY 11747**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **DV** ☐ Delete  
 NAME **LAUDER, WILLIAM P**  
 STREET ADDRESS **7 CORPORATE CENTER DRIVE**  
 CITY-ST-ZIP **MELVILLE NY 11747**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

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 trustee 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.

SIGNATURE

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**1/18/02 631-847-6326**  
 Date Daytime Phone #

CR2E034 (9/01)

B00209101

BB Services

**Bobbi Brown Professional Cosmetics Services Inc.**

**Directors**

Richard Kunes  
Bobbi Brown  
Rosalind Landis  
Fred H. Langhammer  
William P. Lauder  
Paul E. Konney

*Attachment*

*# F96 0000054A*

**Officers**

**Title**

Bobbi Brown	Chief Executive Officer
Rosalind Landis	President
Richard Kunes	Senior Vice President - Chief Financial Officer
Paul E. Konney	Senior Vice President - General Counsel - Secretary
Andrew J. Cavanaugh	Senior Vice President - Human Resources
Gerald Z. Gibian	Vice President - Tax and Real Estate & Customs
William P. Lauder	Vice President
Ralph M. Dereshinsky	Assistant Secretary
Karen Lowney	Assistant Secretary
Judith M. Mann	Assistant Secretary
Lesley Moradian	Assistant Secretary
Lee Puccini	Assistant Secretary
Gary S. Richter	Assistant Secretary
Spencer G. Smul	Assistant Secretary
James Schwecherl	Assistant Secretary

The mailing address for all of the above is as follows:

7 Corporate Center Drive  
Melville, NY 11747